

Abstractbook

Preliminary version

28th INTERNATIONAL CONFERENCE

ON HEALTH PROMOTING HOSPITALS AND HEALTH SERVICES

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Development of health-oriented Health Care Management Systems –
How can Health Promotion optimize health gain and
create more sustainable and equitable health systems?

Scope & Purpose.....	4
Program	4
Plenary 1: Health-orientation of health services by management systems – what and why?	5
Plenary 2: Health orientation of health care services by management systems – how? – Models and standards of good practices	6
Oral session 1.1: Symposium - Lessons from Pandemic: Re-orientation of Health Promoting Hospitals and Health Services-Healthy Hospital 2.0.....	8
Oral session 1.2: Healthy workplace I	8
Oral session 1.3: Prevention of NCDs and chronic disease management I	10
Oral session 1.4: Health promotion strategies for dementia	12
Oral session 1.5: Digitalization in health care and health promotion	14
Oral session 2.1: Symposium - HPH & Environment	17
Oral session 2.2: Health care management systems, structures and processes to optimize health gain for patients, staff and populations served I	17
Oral session 2.3: Health promotion responses to the COVID-19 pandemic I	20
Oral session 2.4: Age-friendly health care.....	21
Oral session 3.1: Workshop - HPH and Health Literate Health Care Organizations	24
Oral session 3.2: Health care management systems, structures and processes to optimize health gain for patients, staff and populations served II	24
Oral session 3.3: Prevention of NCDs and chronic disease management II.....	26
Oral session 3.4: Supporting patient behavior change and healthy lifestyles	28
Oral session 4.1: Governance models, culture, policy and leadership for HPH.....	31
Oral session 4.2: Healthy workplace II	33
Oral session 4.3: Monitoring, implementation and evaluation	35
Oral session 4.4: Health literate health care organizations.....	37
Oral session 5.1: Enhancing people-centered health care and user involvement.....	40
Oral session 5.2: Health workforce practice and training	42
Oral session 5.3: Health promotion responses to the COVID-19 pandemic II	44
Oral session 5.4: Tobacco prevention and cessation	46
Mini Oral Session 1: Structures and processes of health-oriented management systems.....	48
Mini Oral Session 2: Enhancing people-centered health care and user involvement	52
Mini Oral Session 3: Supporting patient behavior change and healthy lifestyles.....	56
Mini Oral Session 4: Health promotion responses to the COVID-19 pandemic.....	59
Mini Oral session 5: Applying the HPH settings approach to specific target groups	62
Poster Session 1: Governance models, culture, policy and leadership for HPH	66
Poster Session 2: Health care management systems, structures and processes to optimize health gain for patients, staff and populations served	68
Poster Session 3: Health literate health care organizations	85
Poster Session 4: Health workforce practice and training	88
Poster Session 5: Monitoring, implementation and evaluation	93
Poster Session 6: Accessibility of services	102
Poster Session 7: Digitalization in health care and health promotion.....	104
Poster Session 8: Patient and provider communication and patient empowerment.....	108
Poster Session 9: Supporting patient behavior change and healthy lifestyles	117
Poster Session 10: Supporting patient behavior change and healthy lifestyles: Addictive behaviors	124
Poster Session 11: Supporting patient behavior change and healthy lifestyles: food, nutrition and diet	127
Poster Session 12: Supporting patient behavior change and healthy lifestyles: Physical activity	132
Poster Session 13: Tobacco prevention and cessation.....	137

Poster Session 14: Prevention of NCDs and chronic disease management.....	147
Poster Session 15: Health promotion responses to the COVID-19 pandemic	152
Poster Session 16: Child, adolescent and maternal health	162
Poster Session 17: Age-friendly health care.....	175
Poster Session 18: Age-friendly health care: Supporting behavior change and healthy lifestyles	189
Poster Session 19: Health promotion strategies for dementia	194
Poster Session 20: Mental health	199
Poster Session 21: Healthy workplace	211
Poster Session 22: Sharing information, research and capacity.....	227
Poster Session 23: Identifying and addressing health needs in the society	231
Poster Session 24: Environmental sustainability, climate change and health.....	236
Index	238

Preliminary version

Scope & Purpose

The International Network of Health Promoting Hospitals and Health Services (HPH Network) was founded to support the implementation of the fifth strategic action area of the Ottawa Charter for Health Promotion (1986) – to “reorient health services”. By that, it was aimed to make health systems more responsive to new health needs in rapidly changing societies by using quality philosophy and methodology, techniques of organizational change management as well as evidence-based procedures.

More than thirty years later the vision of reorientation of health services is even more valid and important. Challenges – such as changing demographics, new disease panoramas, progress in clinical care and an increasing gap between needs and resources – are still relevant and now being increased by growing inequities in health, the ongoing digital transformation, challenging pandemics and a critical responsibility for a sustainable society. Furthermore, by now evidence has been accumulated on effects of health promotion, knowledge on mechanisms explaining how these effects optimize medical interventions, and on their cost effectiveness. However, most health systems are still disease-oriented and governed in ways that focus more on short term economic outcome and not on ethical, sustainable and equitable health gains.

In its Global Strategy for 2021-2025, the HPH Network defined as its vision that hospitals and health services orient their governance models, structures, processes, and culture to optimize the health gains of patients, staff, and populations served as well as to support sustainable societies. To facilitate this reorientation of health services, governance models, reimbursement and outcome monitoring systems need to be changed, too.

Health-orientation of health services by management systems – what and why?

The first plenary session with two keynotes will shed light on what health-orientation of health services through management systems means and why governance models should be health-oriented and balance health outcomes, ethical and economic aspects. Answering this complex question will have to take different perspectives into account: health needs in the society, health systems research, health management, the needs and values of stakeholders and populations served, like patients, relatives and staff, and the health promotion vision.

Health-orientation of health care services by management systems – how? – Models and standards of good practices

The second plenary session will outline how health orientation of health services can be implemented through management systems by means of standards and models of good practice, by three keynotes.

In its parallel and poster sessions, the conference will provide space for presentations and discussion on a list of topics related to the new 2020 Standards for Health Promoting Hospitals and Health Services and on topics related to the HPH Task Forces and Working Groups.

Program

07:30-08:00

Pre-event virtual meetup and information, digital meet & greet

08:00-08:15

Conference opening

08:00-16:35

Poster presentation

08:15-09:30

Plenary 1: Health-orientation of health services by management systems – what and why? (Including panel discussion)

09:30-09:40

Movement break

09:40-10:40

(Mini) Oral parallel sessions 1

10:40-10:45

Break

10:45-11:45

(Mini) Oral parallel sessions 2

11:45-11:50

Break

11:50-12:50

(Mini) Oral parallel sessions 3

12:50-13:00

Movement break

13:00-14:15

Plenary 2: Health orientation of health care services by management systems – how? – Models and standards of good practices

14:15-14:25

Conference closing

14:25-14:30

Break

14:30-15:30

(Mini) Oral parallel sessions 4

15:30-15:35

Break

15:35-16:35

(Mini) Oral parallel sessions 5

Plenary 1: Health-orientation of health services by management systems – what and why?

Introductory keynote: Why should governance models be health oriented and balance health outcomes, ethical and economic aspects? – A health systems perspective from the OECD

KLAZINGA Niek

The Organization for Economic Cooperation and Development supports its 38 member states in the development of their economies. Health Care is considered as a part of the broader economy and does both contribute to the welfare of populations as consume a considerable amount of available resources. To justify investments through health care, the added value from a societal perspective is assessed. Since 2002 the OECD reports on the Quality and Outcomes of Health Care systems and since 2017 these reports include data on patient reported outcomes.

The performance of specific health care services, such as hospitals, is reflected upon from the perspective of their contribution to the overall system goals: the health of the population. Hence system incentives should help align the hospital goals with the population-based health system goals. This is increasingly asking for health care delivery systems that take the integrated care trajectory pathways as the basis of governance and organization of care. Health care services should support people in realizing their potential health and they can do this through evidence- and person-based interventions. In this way the services add value for individuals as well as populations which is both ethical and economically sound.

Contact: KLAZINGA Niek
OECD Paris
niek.klazinga@oecd.org

Introductory keynote: Health Orientation of Health Services – What do we mean and why should governance models be health oriented?

KRISTENSON Margareta

The International Network of Health Promoting Hospitals and Health Services (HPH) was founded to support a reorientation of health services, with the aim to become more responsive to health needs in societies served and contribute to the pursuit of health, as described in WHO Ottawa charter for Health Promotion 1986. The HPH vision aimed at meeting the rising challenges identified for health services especially of changing demographics with more elderly, new disease panoramas with

more chronic diseases and multimorbidity, new treatment possibilities and new demands expressed by patients, all of this with an increasing gap between needs and resources. These challenges are even more prominent today. Moreover, evidence has now accumulated on effects of prevention and health promotion interventions, knowledge on how these interventions optimize medical interventions and on their cost-effectiveness. The HPH vision of using health orientation as a means for a more holistic, proactive and effective health services is therefore even more relevant today. Orienting health services towards best possible health gain is an obvious aim for patients, relatives and professionals and, also, for most purchasers and politicians. However, ambitious efforts to develop more cost effective health systems using New Public Health Management have in many cases lead to health services where economic gain is the "bottom line" and economy has become the aim, not the means, for best possible health gain. Also, the main part of quality systems are disease-oriented with main focus on medical treatment and outcomes for specific diseases and less focus on holism, promotion, prevention and patient's perceptions of their health outcome. The new HPH definition (2020) expresses that "HPH shall orient their government models, structures and cultures to optimize health gains of patients, staff and populations served and to support sustainable societies." To achieve this, management, leadership and organization need to develop explicit objectives for health orientation, health promotion and prevention, but also perform routine outcome assessment on health gain. These need to include, beyond important medical and professional outcome measures, also measures on patient reported outcome (PROM) in terms of health related quality of life (e.g. SF 36) and patient reported experience (PREM). Both of these can be routinely assessed, and monitored, as is done at many places in quality registers and quality improvement. If used for feed-back and learning not only to stakeholders/purchasers but also for professionals and "users" i.e. patients and relatives, this can become an essential tool for a dialogue for needs assessment, in clinical settings and in health service management. This can also lead to a health promoting workplace, where ethical stress at workplaces can be changed towards a learning organisation and professional pride. Health gain measurements as a tool for health service management and health policy can in this way optimize health gain of patients, staff and populations served and create more sustainable health systems.

Contact: KRISTENSON Margareta
Professor emerita, MD, Social medicine and Public Health,
Linköping University/Region Östergötland
Past chair GB Int HPH network
Senior Advisor Swedish HPH network
margareta.kristenson@liu.se

Plenary 2: Health orientation of health care services by management systems – how? – Models and standards of good practices

Value Based Health Care: promises and realities

VALDERAS Jose

Decision-makers around the world face a series of common problems when considering options for improving health care performance. In previous decades, efforts have been direct to optimising quality and safety in health care delivery, with a focus on the delivery of care that is evidence-based and the implementation of a range of mechanisms that reward performance based on the adherence to the best evidence. A fundamental shift is now taking place with the explicit focus being placed on the outcomes of care, rather than the processes by which those outcomes are achieved. This value-based health care approach places particular importance on those outcomes that matter most to patients and makes patient reported outcomes and experiences critical to the measurement of value. Crucially, it can be instrumental in reorienting health care for meeting the needs of people who suffer from multiple health conditions (multimorbidity). In this keynote, Prof. Valderas will provide an overview of the principles of value-based health care, the evidence for the impact of information on patient reported outcomes on health care delivery and recent developments in the identification of metrics and relevant international experiences (ICHOM, UKPROMS, OECD PaRIS).

Contact: VALDERAS Jose

Professor of Health Services & Policy Research, University of Exeter
Visiting Professor, National University of Singapore
Visiting Researcher, Université de Paris
j.m.valderas@exeter.ac.uk

Model of good practice from France

BATTEUX Frederic

The 4th French Health and Environment Plan recalls that 23% of deaths and 25% of chronic diseases worldwide can be attributed to environmental and behavioural factors and that the health system is a major player in environmental health in more than one way.

AP-HP is engaged in this "preventive shift" with regard in particular to the chronic diseases which becomes a major field of prevention: their prevalence could be reduced through health promotion and prevention actions. These actions are essential at any stage of the disease, throughout the health care chain, to improve health outcomes and quality of life.

Prevention and promotion activities can only develop fully if integrated into care with an integration into the practice of

health professionals. We must not think of an organization of preventive care parallel to the organization of curative care. Promotion and prevention must be perceived by each actor in the health system as one of its "natural" missions and not as an "optional" activity.

L'AP-HP is very active in screening, health education and prevention, particularly in cancer, sexual health and addiction, and with transversal actions too, like adapted physical activity, therapeutic education of the patient, especially for chronic diseases, in its health territory.

In his next medical strategic plan, AP-HP sets out to operate its health data warehouse for public health purposes: analysis of the links between certain environmental factors and their effects on health leads to a better understanding of diseases and, above all, to the definition of preventive actions.

AP-HP will develop screening and prevention: in the care (new tools, informations, synergy of the actors in the screening channels; connected objects, artificial intelligence, e-cohorts of chronic patients ,...); in education and communication (teaching of preventive medicine among students and medical practitioners; communication to target audiences and the general public); and in research prevention and screening as a valued area of research in French university hospitals).

The AP-HP will be firmly committed to sustainable development and ecological transition, especially with his new environmental health project of eco-responsible maternities.

Contact: BATTEUX Frederic

Directeur médical - Chief medical officer, Direction de la stratégie et de la transformation, Aistance Publique – Hôpitaux de Paris (AP-HP)
frederic.batteux@aphp.fr

2020 HPH Standards: an instrument for self-evaluation and learning

GRÖNE Oliver

Initiated by the WHO in 1988, the International Network of Health Promoting Hospitals and Health Services (HPH) supports members to systematically incorporate health promotion concepts, values, frameworks, and evidence into the governance, management, structure, culture, and operations of hospitals and health services. HPH aims to optimize health gains of patients, staff and populations served to support sustainable societies by utilizing the setting in which people live, learn, work, and use various services.

The 2020 Standards for Health Promoting Hospitals and Health services reflect various areas of policy, practice, and evidence to support a broad implementation of the HPH vision. The HPH Standards build upon years of work and experience within the HPH Network. They further address current opportunities and challenges recognized by leading international organizations, such as those defined in the United Nations Sustainable Development Goals. Five overarching HPH Standards have been identified that focus on organizational commitment, ensuring access to services, enhancing people-centered health care and user involvement, creating a healthy workplace and healthy setting, and promoting health in the wider society. Standards encourage the refocusing of a hospital or health service's strategy towards health orientation and health outcomes to

truly transform the organization into a health promoting setting.

To operationalize the 2020 Standards, the International HPH Network conducted a process to define a list of concrete measurable elements for each Standard and substandard. These will be compiled into a self-assessment manual which can be used to complete performance assessments in relation to an organization's uptake of the standards, track progress over time, and to stimulate continual internal improvement processes. The International HPH Network will further create tools like an online platform, which will allow linkage to relevant outputs, such as publications, HPH Task Force and Working Group initiatives, and best-practice examples to their corresponding Standards. The 2020 HPH Standards and Self-Assessment manual indicate a new era for HPH as we continue to advance and adapt the HPH vision and work towards increasing health gain for patients, staff, communities, populations, and the environment.

Contact: GRÖNE Oliver

CEO of the International HPH Secretariat, Vice Chair of the Board,
OptiMedis AG Hamburg, Germany

info@hphnet.org

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Oral session 1.1: Symposium

Lessons from Pandemic: Re-orientation of Health Promoting Hospitals and Health Services-Healthy Hospital 2.0

LIN Chia-Chen, HUANG Hui-Ting, LIN Jin-Ding, CHUO Ying-Hsiang, WU Chien-Yuan, CHIA Shu-Li, WU Chao-Chun

Introduction

During the COVID-19 pandemic crisis, health promotion becomes more important than ever to support the health and well-being of people in our communities. Taiwan has promoted "Healthy Hospital Accreditation" since 2017. It integrated the recognitions of health promotion hospitals, aging-friendly health care, smoke-free hospitals and incorporated the concepts such as health literacy and shared decision making. There are 203 healthy hospitals nationwide by the end of 2020.

Purpose/Methods

Under the COVID-19 epidemic, hospitals and other health service systems are facing unprecedented challenges, and the role of healthy hospitals must be reconsidered. Therefore, Taiwan further developed the "Healthy Hospital Accreditation Version 2.0" in 2020. Separated the chapters of "Climate Action", "Age-Friendly Integrated Health Care" and "Person-centered Care" to highlight their importance. This practice has been adopted by the International Network of HPH & HS in the 2020 Standards for HPH and HS which announced in December 2020.

Results

The contents of 2020 Standards for HPH and HS covers 5 major standards: Demonstrating organizational commitment for HPH, ensuring access to the service, enhancing people-centered health care and user involvement, creating a healthy workplace and healthy setting, and promoting health in the wider society. It reflects various novel areas of policy, practice, and evidence in order to support a broader implementation of the HPH vision. Moreover, hospitals can re-examine their health promotion strategy to cope with the health system challenges.

Conclusions

Taiwan is the largest member network in the International Network of Health Promoting Hospitals, with a total of 136 member hospitals. We actively participated in International HPH Conferences and shared experience in promoting various health promotion issues in hospital setting. Through this workshop, we expect to invite international and Taiwanese experts to share practical experience of HPH and to discuss how to implement health promotion in daily routines.

Contact: LIN Chia Chen

Taiwan Society of HPH, 3F., No.400, Sec.2, Bade Rd
10556 Taipei, hphthmail@gmail.com

Oral session 1.2: Healthy workplace I

Utilizing APP and physical fitness exercise in self-health management of nursing staffs

LIAO Wen-Tsz, YE Yu-Shi, KUO Hung-Yao, HSU Hung-Yi

Introduction

Nursing staff have long-term work pressure from working long shaft hours which can affect health due to abnormal meal pattern and suboptimal lifestyle. The three main reasons which caused nursing staff's overweight are insufficient physical activity, excessive diet and abnormal diet pattern. Therefore, the purpose of this study is to investigate the effectiveness of nursing staff's weight control using mobile phone caloric calculation software and diet control interventions.

Purpose/Methods

This 6-month study uses a central Taiwan teaching hospital's orthopedic ward nurses as objects since 8 out of 16 nurses have BMI greater than 24 Kg/M² (Normal value: 18.5 ~ 24 Kg/M²). Interventions methods were: 1. Self-monitoring: Each staff member downloads caloric calculation software for diet planning, and cooperates with physical fitness exercises. 2. Self-assessment: Weekly assessment of weight, calorie intake and BMI values. 3. Group reinforcement behaviors: Regular announcement of all data to help motivate each other.

Results

Sixteen people were tested for 6 months, results were: Four people had lost more than 4 kg of weight. The average weight before was 64.6 kg (SD=14.1, average value :64.6 kg), and decreased to 59.6 kg after weight control (SD=13.2, average value :62.8kg), a decrease of 7.7%. The average BMI before was 25.1 Kg/M², and dropped to 24.3 Kg/M² after weight control, a decrease of 3.16%. The daily calorie intake of each person is 2200-2800kcal before, which decreased to 1600-1950kcal after 6 months.

Conclusions

This study implements interventions on staff's physical activity and dietary patterns. The use of mobile phone calorie calculation software decreases excessive calorie intake caused by lack of understanding of calories and nutritional values of food. During the study, staff motivated each other and shared software skills. Changes in staff's weight and BMI were announced regularly to show the effectiveness of efforts and to strengthen individual and group motivation, allowing ongoing control of calories to achieve weight control.

Contact: YE Yu-Shi

Tungs' Taichung MetroHarbor Hospital
43503 梧棲區, a0917565572@gmail.com

The relationship between workplace safety climate and nurses' use of hazardous drugs safe handling precautions

LIN Ying Siou, LOU Meei Fang

Introduction

Research demonstrates that the nurses' perceptions regarding workplace safety climate and perception to personal protective equipment use are common factors affecting their compliance with safety precautions. This study aims to explore the relationship between nurses' perception of the workplace safety climate and their behaviour regarding the use of safe handling precautions when administering hazardous drugs intravenously.

Purpose/Methods

This study recruited nurses had experience of intravenous administration HDs for more than 3 months from one medical centre and two regional hospitals, each part of the university medical system in Taiwan. The questionnaire developed by the authors comprises workplace safety climate scale and hazardous drugs safe handling behavior scale. In order to explore the psychometric properties of workplace safety climate and nurses' use of HD safe handling precautions behavior scale, the data were randomly split into two groups, one group for exploratory factor analysis, and the other for confirmatory factor analysis. We used the samples (N = 247) for confirmatory factor analysis to verify the model by PLS-SEM 3.2.8.

Results

The PLS-SEM analyses revealed that workplace safety climate can explain 29.3% of the variance in nurses' behavior regarding HD safe handling precautions during intravenous administration. The "Clinical Care Situation," "Colleagues Remind Each Other," and "Easy usage of Personal Protective Equipment (PPE)" of workplace safety climate were significantly associated with nurses' hazardous drugs safe handling behavior.

Conclusions

This study identified accurate factor of safety climate associated with nurses' behavior of use of hazardous drugs safe handling precautions.

Contact: LIN Ying Siou

National Taiwan University Hospital
Taipei, 020607@ntuh.gov.tw

Individual- and workplace-level determinants of white-collar employees' reduction in sedentary behaviors

KIM Soo Kyoung, KIM Hyekyeong

Introduction

The purpose of this study is to figure out individual- and workplace-level determinants of intention and behaviors to

reduce occupational sedentary behavior (SB) among white-collar employees based on Integrated Behavioral Model (IBM).

Purpose/Methods

We applied a mixed-methods approach to bring out an integrative explanation. First, Focus Group Interviews (FGIs) were conducted for three groups with a total of 21 participants, and the findings were reflected in survey questionnaire. Survey participants were a total of 377 employees from 18 workplaces. Informations on individual- and workplace-level factors were measured separately. We used thematic coding to analyze FGI data and multilevel regression modeling to analyze survey data, taking into account features of nested data.

Results

According to FGI findings, a crucial individual-level factor affecting intention to reduce SB was a person's interest in health. People in lower positions at the workplace were more concerned about their colleagues'/bosses' perception of SB reduction. Workplace-level factors as culture, the physical environment inside and outside the office, health-related systems or policies, however, seemed to have much higher influence on lowering SB. Survey results have shown that individual-level factors related to the stronger intention to reduce SB were higher experiential attitude, descriptive norm, and self-efficacy. Furthermore, the stronger intention to reduce SB, the greater practice of SB-reducing behaviors. The most impactful workplace-level factor on behaviors to reduce SB was 'the number of health-promoting systems and policies', followed by 'distance of office building to public transportation', 'sit-stand workstations', and 'convenience facilities'.

Conclusions

Both individual- and workplace-level factors were shown to affect SB reduction behaviors among white-collar employees. To minimize SB, individuals must be targeted with an emphasis on improving experiential attitude, descriptive norm, and self-efficacy. Lastly, more comprehensive workplace-level efforts across policies, systems, physical environment, and culture are essential to build health-friendly workplaces.

Contact: KIM Soo Kyoung

Department of Health Convergence, Ewha Womans University
52, Ewhayeodae-gil, Seodaemun-gu, Seoul, Republic of Korea
03760 Seoul, skkim329@ewhain.net

The Prevalence of Renal Dysfunction for the Medical Staff of a Hospital in Taiwan and Corresponding Health Promotion Management Plan

LEE Meng-Szu, WU Ming-Tsang, DAI Chia-Yen

Introduction

It can gradually develop into chronic kidney disease if ignored the problem of renal dysfunction. To understand the renal function status of the medical staff in a Taiwan's hospital, this study using the physical examination data from 2012 to 2017 statistically analyzed the prevalence of renal dysfunction and related influencing factors, and then established the corresponding

health promotion management scheme for patients with renal dysfunction problem.

Purpose/Methods

This study enrolled the physical examination data of 4496 medical staff. The normal value of CRE and eGFR as the basis for evaluating renal function are 0.6-1.5 mg/dl and 90~120 ml/min/1.73m², respectively. The Minitab v17 software was used to statistically analyze the prevalence of renal dysfunction, and the related influencing factors were analyzed by multivariate logistic regression as well. Finally, the corresponding health promotion management plan was then established for patients with renal dysfunction problem.

Results

The average age of 4496 medical staff was 37.0±11.0 years. The prevalence of renal dysfunction was 56.9%, which was 17.8% in 1130 males, significantly lower than 39.1% in 3366 females ($\chi^2 = 118.6$, $P < 0.001$). The ANOVA test showed both eGFR and CRE of men were significantly lower than that in women. Multivariate logistic regression analysis showed gender and urinary protein were the main influencing factors of renal dysfunction. Further, the corresponding health promotion management scheme was established.

Conclusions

The results of statistical analysis showed that the prevalence of renal dysfunction in 4496 medical staff was 56.9%, which means that over half of medical staff were in abnormal renal function. Therefore, this study aimed at the above-mentioned high-risk groups to develop corresponding nursing measures for health promotion management, in order to prevent and delay the development of kidney disease.

Comments

This study can be used as a reference for the implementation of health promotion management to medical staff with the renal dysfunction problem.

Contact: LEE Meng-Szu

Kaohsiung Medical University Hospital, Kaohsiung Medical University, No.100, Tzyou 1st Road, 807 Kaohsiung, vvykimo@gmail.com

Oral session 1.3: Prevention of NCDs and chronic disease management I

Gender difference in metabolic syndrome and incident colorectal adenoma

CHEN Chih-Dao

Introduction

An emerging body of evidence on the association between metabolic syndrome (MetS) and the risk of colorectal adenoma has been demonstrated, particularly emphasizing obesity, diabetes and insulin resistance. We examined whether

the effect of MetS and its individual components on the risk of colorectal adenoma varied with gender.

Purpose/Methods

A total of 59,767 subjects aged 40 years or older participating in the Keelung community-based integrated screening program between 2001 and 2009 in Keelung, Taiwan were recruited. We use a prospective cohort design to follow up a normal cohort to ascertain incident colorectal adenoma over time. Cox proportional regression models were used to assess the effect size of the association between baseline MetS and the risks of colorectal adenoma and advanced adenoma.

Results

The effect of MetS on colorectal adenoma was statistically significant, with a crude HR of 1.47 (95% CI: 1.29–1.68). In males, the crude HR was 1.39 (95% CI: 1.17–1.64), and the adjusted hazard ratio (aHR) was 1.33 (95% CI: 1.13–1.58) after adjustment for age, smoking, alcohol consumption and f-Hb concentration. The corresponding figures for females were 1.50 (95% CI: 1.21–1.87) and 1.33 (95% CI: 1.06–1.66) after adjustment for age and f-Hb concentration. However, an abnormal waist circumference (aHR=1.38 95% CI: 1.12–1.71), hypertriglyceridemia (aHR=1.31; 95% CI: 1.05–1.62) and a moderately higher level of glycemia (100–125mg/dL, aHR=1.44, 95% CI: 1.12–1.85) contributed to a higher risk of colorectal adenoma in females.

Conclusions

Our study first identified MetS as a risk factor for colorectal adenoma with a distinct temporal relationship. This effect was further intensified by the additional finding that a greater number of individual components led to an elevated risk of colorectal adenoma suggesting, a dose-response effect.

Contact: CHEN Chih-Dao

Far Eastern Memorial Hospital,
21, Nan-Ya S. Rd., Sec.2 Pan-Chiao
220 New Taipei City, cdchen0815@gmail.com

The report of metabolic syndrome in a health-promotion hospital

SHEN Wei-Hong, LI Yu-Jie, CHEN Yu-Shan, YANG Nein-Jung, CHOU Chi-Chun, HUNG Ling-Yu

Introduction

Metabolic syndrome (MS) is related with cardiovascular disease and other chronic disease. In Taiwan, the prevalence of metabolic syndrome is gradually increasing as the change of diet habit. As a health-promotion hospital, Yonghe Cardinal Tien Hospital provided health lectures, exercise programs, and employees' health examination every two years to make employees gain and maintain better health status. Thus, this study is focused on the improvement of metabolic syndrome within the susceptible population under our health-promotion programs.

Purpose/Methods

Data from employees' health examination in 2017 and 2019 were collected. Total of 93 employees was enrolled. They not only had health examination both in 2017 and 2019, but also met more than 3 criteria of metabolic syndrome in 2017. We analyzed

age, gender and five indices of metabolic syndrome, including blood pressure (BP), waist circumference (WC), fasting glucose (FG), triglyceride (TG), and high-density lipoprotein cholesterol (HDL-C). Statistical methods contained descriptive analysis, chi-square analysis, and Paired-T test.

Results

We had 67 females and 26 males, and index numbers of MS were significantly decreased from 3.48 to 3.01 ($P < 0.05$) between 2 years. Significant results included increased HDL-C (male: +4.62mg/dl and female: +2.79mg/dl), and decreased indices of MS (-0.42 vs -0.49). There was improvement without significance in male WC and FG, and female systolic BP, FG and TG. Also, male BP and TG, and female diastolic BP and WC were deteriorated. Finally, the population of MS was diminished by 28%.

Conclusions

In our study, the index numbers of metabolic syndrome were decreased significantly which was most resulted from the HDL-C. Through health examination, we encouraged employees with abnormal tests to participate the health-promotion programs. After two-year follow-up, the population of metabolic syndrome was decreased. However, there was still insignificant elevation in male BP and TG, and female diastolic BP and WC. Therefore, it may be necessary to offer healthy diet or lectures to make employees healthier in the future.

Contact: CHOU Chun chen

Yonghe Cardinal Tien Hospital

No.80, Zhongxing St., Yonghe Dist., New Taipei City

cthyh103@gmail.com

A LASSO-Derived Risk Model for Subclinical CAC Progression in Asian Population With an Initial Score of Zero

WU Fu-Zong, WU Yun-Ju, MAR Guang-Yuan, WU Ming-Ting, CHEN Jin-Shuen

Introduction

This study is aimed at developing a prediction nomogram for subclinical coronary atherosclerosis in an Asian population with baseline zero score, and to compare its discriminatory ability with Framingham risk score (FRS) and atherosclerotic cardiovascular disease (ASCVD) models.

Purpose/Methods

Clinical characteristics, physical examination, and laboratory profiles of 830 subjects were retrospectively reviewed. Subclinical coronary atherosclerosis in term of Coronary artery calcification (CAC) progression was the primary endpoint. of the 830 subjects with baseline zero score with the average follow-up period of 4.55 ± 2.42 year in. These study results showed in the 612 subjects with baseline zero score, 145 (23.69%) subjects developed CAC progression in the training cohort ($N = 612$), while in the validation cohort ($N = 218$).

Results

51 (23.39%) subjects developed CAC progression. This LASSO-derived nomogram included the following 10 predictors: "sex," "age," "hypertension," "smoking habit," "GGT," "CRP," "HDL-C,"

"cholesterol," "waist circumference," and "follow-up period." Compared with the FRS and ASCVD models, this LASSO-derived nomogram had higher diagnostic performance and AIC and BIC value. The discriminative ability, as determined by ROC was 0.780 in the training cohort and 0.836 in the validation cohort. Moreover, satisfactory calibration was confirmed by Hosmer-Lemeshow test with P-values of 0.654 and 0.979.

Conclusions

This validated nomogram provided a useful predictive value for subclinical coronary atherosclerosis in subjects with baseline zero score, and could provide clinicians and patients with the primary preventive strategies timely in individual-based preventive cardiology.

Contact: WU Fu-Zong

Kaohsiung Veterans General Hospital

813414 Kaohsiung Veterans General Hospital 386 Ta-Chung 1st

RD. Kaohsiung, Taiwan, ROC, cmw11029@gmail.com

The Influence of Health Promotion Program for Employees with "Diabetes" in the Hospital.

CHENG I-Ting, LI Yu-Jie, CHEN Yu-Shan, TANG Nein-Jung, CHOU Chi-Chun, HUNG Ling-Yu

Introduction

One novel word "diabetes" is known for people with "diabetes" and "obesity." According to WHO in 2016, more than 1.9 billion adults were overweight and over 650 million were obese. Moreover, obesity may lead to insulin resistance and correlate with the development of diabetes. For those with "diabetes," they are in seven times higher risk for mortality. Hence, we hope to improve our employees' health with "diabetes" or with "prediabetes and obesity" via health promotion program.

Purpose/Methods

Every two years, we have employees' regular health examination. In 2017, we identified those with "diabetes (18 people)" and with "prediabetes and obesity (34 people)". Then, we sent notification for them to visit doctor and invited them to participate in health promotion activities such as weight reduction program, exercise walking, or education lecture for healthy diet. Two years later, we reviewed their health status to see whether they have health improvement in weight and blood sugar control.

Results

For sugar control, compared with 2017 and 2019, mean fasting sugar was significantly improved in "diabetes" ($P < 0.05$), while that increased from 108.4 to 111.2 mg/dl in "prediabetes and obesity" without significant difference ($P = 0.307$). For weight control, based on 2019 BMI, 3 subgroups were divided into normal, overweight and obesity. The result showed that 16.7% (3/18) of "diabetes" and 17.6% (6/34) of "prediabetes and obesity" had BMI improvement ($p = 0.33$). Besides, drug selection for diabetes may be related to weight change.

Conclusions

According to our result, through early identification and health promotion program, only blood sugar was improved in diabetes group. Medication was considered as a possible factor. There are many kinds of diabetes medications and some have benefit on weight reduction. Thus, it is important that how to educate doctors to choose medicine with less body weight burden for diabetes patient. In the future, we also need more intensive diet, exercise and weight control program to help our employees healthier.

Contact: CHOU Chun chen

Yonghe Cardinal Tien Hospital
No.80, Zhongxing St., Yonghe Dist., New Taipei City
Taipei, cthyh103@gmail.com

Oral session 1.4: Health promotion strategies for dementia

Dementia- Friendly Community Initiatives in Southern Taiwan: A Public-Private Partnership Model

SIE Ning-Huei, TSAO Wen-Long, WANG Hsiao-Chu

Introduction

The 65 y/o population in Chiayi County is more than 19.82%. Most dementia patient are living at home and community, however, the dementia stigma still have negative effects in the local community. To build up a Dementia- Friendly Community where people with dementia are understood, respected and supported is our core value. In this study we adopted the Public-Private Partnership Model to improve the dementia literacy of the public.

Purpose/Methods

We adopted the bottom-up and top-down approaches to collaborate with public and private sectors from April to December, 2020. The public sectors including local government, health bureau, schools, police department, fire department, post office; we also invite the private sectors such as local community development association, temple, TV channels. Firstly, need assessment is required, and through providing health promotion program with dementia literacy training courses, screening for dementia to have early intervention and recruiting dementia volunteers and friendly shops in the community.

Results

40 community residents completed dementia literacy course, and 200 volunteers recruited from village leaders, post officer, police officers, convenient store managers. We collaborated with public and private sectors to distribute the information of dementia and health care resources. The neurologist and care managers also stepped into households to assist suspected case to diagnosis. Finally, we reported 13 suspected dementia cases, and diagnosis 3 confirmed dementia cases, 10 cases completed dementia consultation.

Conclusions

We connected the resources from hospital and local community with the government's supports to build up a Dementia Friendly Community. It could raise the dementia literacy of the public, early detect the MCI patients, delay the disease severity of dementia patient, improve caregiver's quality of life, and reduce the cost of care. The dementia care is not only in the hospital and we should have well- organized connection of healthcare and community to achieve the instant, convenient, accessible care.

Contact: SIE Ning-Huei

Dalin Tzu Chi Hospital, Buddhist Tzu Chi Medical Foundation
No. 2, Rd. Mingsheng, 62247 Dalin Town, Chiayi County,
eagle0531@gmail.com

Creating the One-Stop Dementia Care Model in Rural Hospital

SIE Ning-Huei, TSAI Jui-Fen, TSAO Wen-Long

Introduction

Dementia has become a growing public health concern in Taiwan. In southern Taiwan, most elderly live alone or with old spouses. However, there is no single test can diagnose dementia, the patients need revisit hospital two to three times. Timely diagnosis of dementia has a wide range of benefits including reduced inpatient length of stay, and improved quality of life for patients and caregivers by facilitating access to treatments. The friendly dementia diagnosis procedure could improve the rate of confirmed cases of dementia.

Purpose/Methods

We arranged one-stop services for patients during their first visit, they could receive the health care services include consultation by neurologist, cognitive function evaluation (CDR and MMSE), laboratory tests (thyroid gland, RPR/VDRL etc.) and brain scans that all test could completed within two hours. The case manager could assist the confirmed cases to arrange for medical care, medication usage and refer them to long-term care system and application for social welfare resources.

Results

Although under the COVID-19 pandemic, there were 132 patients completed one-stop services in January to December, 2020. We diagnosed 26 confirmed cases, 13 cases applied for the disability identification, and referred 30 cases to home care services. Before we conducted this friendly dementia diagnosis procedure, patient have to visit hospital for three times to completed all required tests that cost patient and caregiver's time, and transportation fee.

Conclusions

The one-stop services is the friendly dementia diagnosis procedure that not only could improve the accessibility to dementia diagnosis, medical care and the rate of confirmed cases of dementia for patients, but also could reduce the waste of medical resources for healthcare system and the days off from work for family caregivers. The case manager system connects the patients to long-term care services in community such as community care stations, day care, home visit for dementia patients who diagnosed from mild to severe stages.

Contact: SIE Ning-Huei

Dalin Tzu Chi Hospital, Buddhist Tzu Chi Medical Foundation
No. 2, Rd. Mingsheng, 62247 Dalin Town, Chiayi County,
eagle0531@gmail.com

CAFÉ Program on Dementia Care among Nursing Home Residents in Taiwan

HSU Chia-Hui, TAI Wei-Ting, PAN Yu-Ling, CHANG Li-Fang, KAO Tung-Wei, KAO Chi-Wen

Introduction

Old adult with dementia has multiple medical issues across their disease progression. In addition, 60-80% sleep disturbances, 30-50% aggressive behaviors, 24%-42% mood disorders and 2.4%-25% sun-down syndrome were existed among dementia older people. Previous studies regarding nursing interventions on multiple dimensions for these populations were relatively sparse. We aim to design a multiple nursing interventions including Cognition enhancement, Able Functional improvement and Emotional stabilization (CAFÉ) for demented residents in a nursing home for the purpose of improving their medical problems.

Purpose/Methods

We comprehensively estimated residents' medical problems including mini-mental status examination, activities of daily living, instrumental activities of daily living and mini-nutritional assessment. We provided multiple interventions for demented residents. Sleep conditions, aggressive behaviors and emotional status were also observed before and after CAFÉ.

Results

Mean age was 86.1 years old, and 66.7% were severe dementia. Mean score of MMSE, ADL, IADL, MNA was 6, 18, 2 and 21, respectively. After two months of CAFÉ, mean score of MMSE improved to 7, MNA increased to 25. ADL and IADL were sustained during this period. It got 20% improvement on sleep disturbances, 16.7% reduction on aggressive behaviors and 16.7% improvement on emotional status.

Conclusions

CAFÉ program is a practical intervention to provide multiple dimensions of nursing care regarding cognition enhancement, function improvement and emotional stabilization for demented residents in nursing home. Through these comprehensive interventions, residents of dementia will be benefited with improvement on cognition, sleep condition, nutritional status as well as maintenance of functional ability and reduction of aggressive behaviors.

Contact: TAI Wei ting

Tri-service General Hospital
Neihu Main Facility : No.325,Sec.2,Chenggong Rd.,Neihu
District,Taipei City 11490, NH052@mail.ndmctsg.edu.tw

Building a fairer and healthier world tuckling dementia in rural Greece

BAKIDES Sofoclis, VARVARESOS Stefanos, NIKOLINAKOS Panayiotis, KALAITZAKI Stamatina, GASPARAKI Maria, KAPAGIANNIS Vasileios, CHARAMIS Angelos

Introduction

The world's population is aging rapidly. Between 2015 and 2050, the proportion of the world's older adults will rise from 12% to 22%. Older people face physical and mental health challenges. Dementia affects approximately 5% of this population. The costs are estimated over 250 billion euros in E.U in 2030. The current Greek health policy is determined mainly by the socioeconomic crisis and budget cuts but not from the estimated needs of 600.000 persons with dementia in 2050

Purpose/Methods

In cooperation with private practice Internists and Neurologists (a specialty not available in our Hospital), we used the Mini-Mental State Examination cognitive tool and brain C/T scan to evaluate our sample. Our objective was to detect, treat patients with dementia and advise caregivers about proper management, disease complications, Caregiver's Burden, give instructions about the correct patient approach, especially towards the non-pharmacological management of agitation. Healthy subjects were given lifestyle instructions, also for cardiovascular and metabolic diseases.

Results

Subjects diagnosed with dementia were prescribed treatment and follow-up were scheduled. Totally,473 consecutive patients over 65 were examined last year. Mean age was 82.4 years,74 patients (15,64%) had Dementia,7.82% had Alzheimer Disease ,0.85 % had Mild Cognitive Impairment, 1.06% Frontotemporal Dementia, 1.06% Lewy Body Disease,0.85% Vascular Dementia, 0.85% Parkinson Disease Dementia. Caregivers' and family members' support was difficult due to a low level of education.

Conclusions

Our study aimed to inform the local population about the prevention of Dementia, assess and treat patients living in our area advise their caregivers through collaboration with private Neurologists and Internists. We have to facilitate the patient's home care and reduce the caregiver burden connecting private and public health professionals, researchers, service planners, and policymakers for better knowledge of the needs of this growing population.

Contact: BAKIDES SOFOCLIS

MOLAOI GENERAL HOSPITAL
1,E.LIMIRAS
23052 MONEMVASIA,LAKONIA,
sbakides@gmail.com

The effect of case management on the needs and satisfaction of family care for dementia

LIN Yi-Yen, LIU Chu-Chun, HUANG Hwei-Ling

Introduction

Dementia is a chronic progressive comprehensive disease. It accounts for 11.2% of the global elderly disabled and dependent. When diagnosed with dementia, the family members have insufficient knowledge of the disease and cannot predict what behavior problems the demented person will have, and whether the needs for case management and the use of needs are met. The aim of this study was to explore the effects of case management on the needs and satisfaction of caregivers for dementia cases.

Purpose/Methods

This study used one-group pretest-posttest design. Individual health education for participants and follow-up health education by telephone after three weeks. Questionnaires such as "Survey on Case Management Needs of Family Caregivers with Dementia", (Mini-Mental Status Examination; MMSE, Clinical Dementia Rating; CDR) were used in this study. Statistical software SPSS/23 for data archiving and Statistical analysis was used for descriptive and inferential data.

Results

The results found that respite service needs ($p=0.001$), information level needs ($p=0.000$), long-term photo resource referral and tracking needs ($p=0.003$), case management mode ($p=0.023$) were significant different in both pretest and posttests.

Conclusions

The intervention of the dementia case management enables the needs of dementia caregivers to use case management and the needs of case management to be met. It can be used at the level of long-term care resource sharing and referral services for elderly to reduce families and elderly with dementia. Regarding the burden of disease and mental behavior care, it was found that the case management model was promoted in dementia service networks to improve the quality of dementia caregiver.

Contact: LIN yiyen

Chang Gung Medical Hospital
Rm. C13, 10F., No. 123, Dinghu Rd., Guishan Dist., Taoyuan City 333008, Taiwan (R.O.C.), Taoyuan City,
lovely.yi.yen@gmail.com

Oral session 1.5: Digitalization in health care and health promotion

Implementation of an intelligent self-service charging system

HSU Hung-Yi, WU Jia-Min, CHEN Li-Syueh, CHENG Bor-Wen

Introduction

The average number of outpatient visits in our hospital was almost 80,000 each month. During the COVID-19 pandemic, we reviewed the medical process and found that patients waiting for payment will gather patients and increase the risk of infection. The purpose of the project was to build an intelligent self-service charging system.

Purpose/Methods

Team members developed a patient-oriented smart medical payment model: 1. Automation of the charging system was established to streamline the working process. 2. Promoted self-service payment technology and applied it to financial cards, credit cards, and mobile payments. 3. Set up an online payment system to support remote payment for patients and family members. 4. Used big data and business intelligence (BI) systems to observe long-term trends in patients' preferences. 5. Added a dynamic system for monitor real-time waiting status.

Results

The average satisfaction of payment before policy implementation in 2019 was 78.3 from patients. In April (during implementation) and September (after implementation) 2020, satisfaction increased to 82.4 and 82.6, respectively. This strategy not only contributed to the efficiency of charging operations but also provided self-service and remote payment technologies that can enhance patients' autonomy.

Conclusions

During the COVID-19 pandemic, most patients still have to go to the hospital for advanced treatment. Our aim was to minimize the patient's stay in the hospital to reduce the risk of exposure. After the implementation, we found that multi-dimensional payment technology can provide efficient services, while big data and BI systems can improve management efficiency. This project re-created the service workflow and effectively built up a self-service medical environment. The system will be the support for future telemedicine.

Contact: WU Jia-Min

Tungs' Taichung MetroHarbor Hospital
No.699, Sec. 8, Taiwan Blvd.
Taichung City, m28905108@gmail.com

A study on the relationships among experiential marketing, customer satisfaction, customer loyalty and brand image-The case of health application software

CHUNG Yong-Chuan, KO Yi-Tsen

Introduction

Driven by national policies, the application of smart health in Taiwan has become mature. However, people start to value health nowadays, and think the health status does not make better after the check-up. Based on the above these reasons, we cooperate with technology company to develop the health application to take care sub-health group and also links with health bank of National Health Insurance to manage their health status. Therefore, the purpose of this study is to discuss how to use application software designed by customer needs to increase customer satisfaction and brand image and research results provide managerial implications to hospital managers.

Purpose/Methods

This questionnaire is based on the research of other scholars and revised according to the characteristics of the medical industry. The sample is set to users who have used health application software in Kaohsiung, and applied by multiple regression analysis to analyze customers' data collected from 262 questionnaires.

Results

The findings for this research show that (1) the customer satisfaction is up to 82% after using health application software; (2) the experiential marketing related with the customer satisfaction, customer loyalty and brand image positively and significantly; (3) the geographic variables on gender relate partially with the customer satisfaction and brand image.

Conclusions

As the results conclude that it can increase customer satisfaction, customer loyalty and brand image after customers use health application software. Besides, customers share the experience to their friends and relatives, such as physiological information, check-up report, and health bank and so on, also increase customer satisfaction, customer loyalty and brand image. These results are same as many scholars. Therefore, medical institutions should make good use of the application of smart health to strengthen the brand image and service value

Contact: CHUNG Yong-Chuan

Kaohsiung Municipal Siaogang Hospital; National Sun Yat-sen University
13F., No. 25, Gangping Rd., Xiaogang Dist., Kaohsiung City
812005, Taiwan (R.O.C.), Kaohsiung,
terrychung0623@gmail.com

Ethics, Integrity and Retributions of Infectious Disease Surveillance Systems Using Big Data and Artificial Intelligence: Systematic literature review

ZHAO Ivy Y, MA YX, YU CMW, LIU J, DONG WN, PANG Q, LU XQ, MOLASSIOTIS A, HOLROYD E, WONG WCW

Introduction

COVID-19 raises importance of deployment of digital surveillance systems to support infectious diseases' early warning and monitoring. Machine Learning has been acquired to build data-intensive early warning systems using patient's electronic health records. However, these opportunities create a double-edge sword as the application of ethical governance frameworks often lag behind the technological achievements. This systematic review aims to investigate ethical issues of utilizing AI surveillance system to monitor and detect potential ID outbreak.

Purpose/Methods

Key academic literature database, Google Scholar and the legal and sociological databases were searched up to December 8, 2020. Relevant articles were also retrieved from the documents' bibliography, and other articles. Peer-reviewed, empirical research articles, review reports and grey reports were reviewed and considered. PRISMA guideline and MMAT were followed to ensure the rigor. Identified ethical issues were structured drawing on theoretical framework developed by Asadi & Breidbach that frames related ethical issues.

Results

This systematic review identified 29 peer-reviewed empirical research articles and reports on ethical consideration when integrating digital epidemiology with existing surveillance systems. The six major presenting themes were clustered under individual, organizational, and societal levels, including: awareness of implementing digital surveillance, digital integrity, trust, privacy and confidentiality, civil rights, and governance. Public concerns focused on an inadequate awareness, privacy protection, data integrity and data ownership rights; and immature/uncompleted governance frameworks of utilising digital surveillance for ID outbreak.

Conclusions

The emergence of AI ID surveillance system promises global public health benefits but also ethical challenges. This systematic review provides a more comprehensive ethical framework which will enable AI surveillance ultimately exerts its potential for public health through an ethical pathway.

Contact:

yexuanma@connect.hku.hk

Usability of Mobile Applications: A Concept Analysis to be Used in Health Promotion

KUNG Po-Jen, CHEN Ching-Min

Introduction

Health promotion has been attracting progressively more attention in both academia and industry. This, coupled with technological advancements, has resulted in the development of several mobile applications used in health promotion. Unfortunately, users of the applications have not achieved their goals, since many applications have not provided a smooth user experience. This study aims to clearly identify the defining attributes of mobile app usability in the context of health promotion in order to guide the design of easily usable applications.

Purpose/Methods

It is first necessary to conduct an exploration into app usability, for which this study applies the concept analysis method by Walker and Avant, which includes: (1) identifying the use of the concept, (2) determining the defining attributes, (3) constructing a model case, (4) constructing model, contrary, borderline, and related cases, (5) identifying antecedents and consequences, and (6) defining empirical referents.

Results

This study derives a unified definition of usability from the healthcare perspective—that the defining attributes of "usability of mobile application" are: efficiency, user satisfaction, and learnability.

Conclusions

It is concluded that mobile applications with the defined attributes could achieve their designed goals and reach maximal efficacy, since users would continue using the app on a regular basis, and would recommend it to others. This study has the potential to initiate further investigations into the integration of Information Technology and Health Promotion in health care education or in practical betterment of health.

Contact: KUNG Po-Jen

National Cheng Kung University College of Medicine
No.1, University Road, Tainan City 701, Taiwan (R.O.C)
Tainan City, 126084136@gs.ncku.edu.tw

and real-time monitoring reduce manual interpretation errors and take appropriate clinical treatment.

Purpose/Methods

A project was formed using cross-departmental cooperation from March to September of 2020. Multidisciplinary team members discussed together and imported urinary tract infection risk information warning mode. Five risk factors based on literature, including diabetes, female, having urine catheter, hospital stay over 14 days, and indwelling urine catheter over 7 days, was used as assessment score for an early warning parameter. We summed up classification to define the degree of risk based on previous occurrence of urinary tract infection variables and apply color management (red U indicating high risk and pink U indicating moderate risk) as warning message on digital signage. According to risk level, corresponding care measures for medical staff urinary tract infection included physician dimension, nursing care dimension, and drinking plan.

Results

The finding showed the incidence of urinary tract infection (1.5‰) reduced 1.4‰ than last year 0.9‰. Medical personnel's nursing care knowledge on indwelling urine catheter reached 100%. This project was expanded to the parallel development of the five hospitals of the system.

Conclusions

Medical staff pays more and more attention to the early warning system. Strengthening medical staff's concept of risk warning system, establishing warning system, and understanding the risk factor monitoring project can early detect risk cases and adopt appropriate clinical treatment.

Comments

Education and training is enable medical staff to understand the meaning of warning system and apply corresponding measures and is very important for preventing urinary tract infection among hospitalized patients.

Contact: CHOU Ya-Hui

Taoyuan Ghang Gung Memorial Hospital
No.123,Dinghu Rd.,Guishan Dist,Taoyuan city,Taiwan(R.O.C)
802 Taoyuan, yahe7693@cgmh.org.tw

Application of Digital Signage of UTI Risk Warning System to Reduce the Incidence of Urinary Tract Infection

CHOU Ya-Hui, TSENG Su-Mei, YEH Shu-Ling, HSIEH Suh-Ing

Introduction

Urinary tract infection is the second health care-associated infections. Our ward treats stroke and cancer patients who are vulnerable groups of urinary tract infection. The occurrence of urinary tract infection in November 2019 exceeded the control limit, which caused staff workload. Early scoring warning system

Oral session 2.1: Symposium - HPH & Environment

Dietary Pattern on Climate Change- from Personal Health to Planetary Health

LIN Ming-Nan

Introduction

Climate change is a burgeoning public health concern and it was also highlighted the relationship with health in COP21. The Lancet Countdown Report tracked the progress on health and climate change in five domains which included health care, public health and economics. Without doubt, all human beings will be affected by climate change and facing extremes weather, air pollution, food and water insecurity and emerging infectious diseases.

Purpose/Methods

Health care and public health professionals have an important role in preparing for and responding to these climate change related threats to human health. Three professionals from different fields will be invited to present their experiences of dietary pattern in mitigation the climate impact on health.

Results

The moderator will be Dr. Ming-Nan Lin who is currently the chair of HPH & Environment Taskforce. Mr. Raphael Podsolver is from ProVeg International. Dr. Tina Chiu is the assistant professor of Nutritional Science, Fu Jen Catholic University, Taiwan. Dr. Linda Varona is the physician of Adventist Medical Center Manila, Philippines.

Conclusions

Planted-based diet could reduce the global food-related emissions, and was recommended by scientists and the nutrition societies. In this session, we will discuss about the influence of dietary pattern on personal health and planetary health.

Contact: SIE Ning-Huei

Dalin Tzu Chi Hospital, Buddhist Tzu Chi Medical Foundation
No. 2, Rd. Mingsheng, 62247 Dalin Town, Chiayi County,
eagle0531@gmail.com

Oral session 2.2: Health care management systems, structures and processes to optimize health gain for patients, staff and populations served I

The Implementation of Adolescent- friendly Health Care Initiative in Taiwan

CHIANG Chien-Dai, WU Chao-Chun

Introduction

To promote adolescent-friendly health care and improve the quality of health-care services for adolescents, the Health Promotion Administration, Ministry of Health and Welfare has started to accredit Adolescent-friendly Health Care Initiative among the existing youth-friendly health care facilities following the policy of health promotion in hospitals and clinics since 2018. The mechanism of adolescent-friendly health-care services would be established to meet the global standards by WHO. With 3-year experience of implementing the initiatives, a result will be presented.

Purpose/Methods

The work of promoting adolescent-friendly health-care institution initiative includes: 1. Developing implementation framework for institutional initiatives, the process of accreditation, and related documents according to the framework of HPH standard set in Taiwan, Global Standards for Quality Health-care Services for Adolescents by WHO, and the concept and principles of the Task Force HPH-CA* tool. 2. Conducting hospital/clinic's adolescent-friendly health-care accreditation with the developed standards. 3. Providing guidance and consultation services to institutions for a better preparation for the accreditation.

Results

It is anticipated that about 22 hospitals and clinics will be accredited at the end of September, 2021. And the standard set including 6 standards (Policy and Leadership, Patient Assessment, Patient Information and Intervention, Healthy Workplace and Ensuring Capacity for Clinic Health Promotion, Implementation and Monitoring, Adolescents' Participation), 12 sub-standards, and 20 indicators had been reviewed by the accreditation committee. Feedback related to the accreditation will be collected from the accredited hospitals and clinics.

Conclusions

Hopefully the implementation framework of adolescent-friendly health-care initiative may be integrated into the standard set of HPH in Taiwan, and more than 200 HPHs will pay much attention to the unique health issues associated with adolescents through comprehensive assessment, information and intervention, and continuing health care.

Contact: CHANG Cypress

Taiwan Society for Adolescent Medicine and Health
Fl. 6, Bldg. 2, No. 12, Fuzhou St., Zhongzheng Dist.
100027 Taipei, teens.77380025@gmail.com

Developing the high standard psychiatric sheltered workshop in a general hospital

FANG Chun-Kai, LIN Sheng-Yu

Introduction

It is difficult to continuously operate a psychiatric sheltered workshop in a general hospital. The sheltered workshop, Joy Café at Taipei MacKay Memorial Hospital, was established officially in 2006. Joy Café provided coffee, tea, snacking, and lunch boxes. How to continue to operate and to increase high standard are the most important issues for the sustainable development of sheltered workshop. We want to share our experiences since 2010 to 2019.

Purpose/Methods

Joy Café obtained some financial funds from the Department of Labor of Taipei City Government every year since 2006. In 2010, Joy Café designed a unique registered trademark for brand management. For providing high quality products, Joy café attended several certifications and evaluations regularly. For the café shop's outfield and kitchen, the equipment was always updated and a good environment was maintained. The internal operation meetings are held every three months to ensure the quality of operations. Keeping good enough employees' salaries is the inner ultimate index. In government inspections every two years, searching the highest honor was the most important external index.

Results

Joy Café got the ISO certificate (ISO 9001:2015) since 2016. Joy Café also got the certifications of Fairtrade, Taiwan Organic, Tse-Xin Organic, Societe Generale de Surveillance S.A. (SGS), and Taiwan Symbol of National Quality (SNQ). The month average salaries were higher than NT\$ 11,000 every sheltered employee, and the highest salary was near NT\$ 20,000. In every two-year inspection by Labor Affairs Department of Taipei City Government, Joy Café was the first class in 2011, and became the excellent class in 2013, 2015, 2017, and 2019.

Conclusions

The goal of psychiatric services was not only controlling disorders, but the ultimate goal should be to recover social function and enhance dignity. Developing and sustaining high standard sheltered workshop is the implement of the ideal service of mental rehabilitation.

Contact: FANG Chun-Kai

MacKay Memorial Hospital
92, sec. 2, Zhongshan Rd, Zhongshan Dist.
Taipei, chunkai.fang0415@gmail.com

Implementing the new HPH Standards on a national, regional, and local level – experiences from the Swedish HPH network

HARLID Ralph, KRISTENSON Margareta

Introduction

The International Network of Health Promoting Hospitals & Health Services (HPH) decided on a new set of standards in 2020. These standards are intended for self-assessment and quality improvement of health promoting health service. The new standards are comprehensive and enables assessment of the full HPH concept, including management, patient, co-worker, and population perspective.

Purpose/Methods

The comprehensive design of these new standards are of vital importance. To evaluate health orientating of health services we need to include both management and clinical perspectives. However, the relevance of, and ability to, respond to the standards differ depending on which level in the organisation they are evaluated. To help the self-assessment there is a need to define and illustrate the meaning of each standard, and visualize the results in a way that can be used for improvement.

Results

The Swedish HPH network have translated the standards and created a tool where each standard is defined with a brief help text, and support questions to facilitate assessment. Each substandard is assessed using a visual analogue scale (VAS) instead of a yes/no answer. The tool also allows the exclusion of standards not relevant for their level or organization. The results are then instantly presented in graphs and standards with low fulfilment are transferred to an action plan for quality improvement.

Conclusions

The new HPH standards have received a positive response in the Swedish HPH network. With the addition of a tool to facilitate the assessment the end-users have found it easier to encourage commitment among management and clinicians. Our conclusion is that the standards need to be better defined and linked to measurable elements in order to move our health care institutions towards health orientation.

Contact: HARLID Ralph

Swedish HPH network
ralph@harlid.se

Transition towards Health promoting Hospitals adapting global frame work - Study in Military Hospital of Pakistan

FATAH Abdul, ALI Shahzad

Introduction

Normally, hospitals provide only curative services to community. Health promoting hospital provide high quality comprehensive medical and nursing services, but also develop a corporate identity. The overall goal is better health gain by improving the quality of healthcare, the relationship between hospitals and community HPH activities in hospitals lead to reduction in morbidity & mortality, improved outcomes, reduced treatment costs, stakeholder's satisfaction, quality of life improvement. This study will thus be performed to determine existing healthcare environment in military hospital.

Purpose/Methods

A Mix method study is planned from July - December 2021. The data will be collected through Close Ended Questionnaires, key-informant (KI) interviews and focus group discussions (FGDs) from policy makers, hospital administrators, healthcare providers, patients & their attendants (200 sample size). Following Interventions (working areas) will be included : 1.Lifestyle Improvements on tobacco, alcohol abuse, nutrition and physical activity. 2.Continuity of Care (Integrated home care, hospital and community services integration) 3.Patient Education on various diseases 4.Multidimensional and intercultural approach to health care (Pain free hospital, migrant-friendly hospital, health information in different languages) 5.Safety of patients and staff 6.Environment and amenities (hospital signs and administrative simplification)

Results

Anticipated Outcome: This will enable us to showcase Health Promoting Hospital Concept in Pakistan. Currently whole focus of the health system is downstream without any efforts for health promotion So this will lead to a piloting of hospital based intervention and will transform the policy in local context.

Conclusions

The concept of transition towards HPH settings would bring beneficial change in the healthcare delivery system of Military hospitals by empowering patients and local community. Capacity building on health promotion for healthcare providers, constant policy dialogue, and support from community stakeholders will further strengthen the scope of health promoting hospitals in Pakistan Army Medical Corps

Contact: FATAH Abdul

AFPGMI (Armed Forces Post Graduate Medical Institute), Rawalpindi Pakistan
46000 Rawalpindi, memonfatah@yahoo.com

Exploring Health Care Providers' Perspectives on Health Care Systems for Immigrants in South Korea

JANG Juyoung, LEE Jaekyung

Introduction

In 2019, there are over 1.7 million foreign residents in South Korea, about 3.8% of its total population. Still, previous surveys on immigrants revealed that immigrants' access to health care services was insufficient. This study explored the challenges of health care for immigrants in South Korea from the perspectives of health care providers.

Purpose/Methods

Unstructured interviews were conducted: there were 41 interview participants recruited through snowball sampling, including medical doctors, nurses, social workers, translators, and health staff at free clinics, clinics, general and tertiary hospitals in the Seoul metropolitan area. Participants shared their experiences in working with immigrants, focusing on the challenges and policy suggestions. Interview contents were aggregated into four themes with 14 subthemes.

Results

Participants indicated policymakers' lack of interest in addressing the health of immigrants. Most of participants mentioned the needs of well-trained translators equipped with cultural sensitivity and relevant medical knowledge. Having a family member as a translator was often resulted in jeopardizing the patient's decision-making capacity. Some participants argued that the absence of migrant-sensitive medical protocols could cause misunderstandings between providers and patients or hinder immigrants' access to health services.

Conclusions

There was a consensus that the government should develop a roadmap for promoting the health of immigrants, from implementing preventive measures to providing relevant resources to health care providers. It was suggested to launch a web platform delivering immigration policy concerning immigrants' health and multilingual health information for immigrants and providers. Providing programs promoting immigrants' awareness of health care and the Korean health care systems would be necessary.

Comments

This presentation can be allocated to the mini-oral (pitch) presentation if not applicable for the oral presentation section. Re-activated Seoul 2020 abstract.

Contact: LEE Jaekyung

SMG-SNU Boramae Medical Center
20, Boramaero-5-gil, Shindaebang-dong, Dongjak-gu
07061 Seoul, jaekyjaeky@naver.com

Oral session 2.3: Health promotion responses to the COVID-19 pandemic I

Covid-19 pandemic: observing, identifying and solving the risk of contagion in an important Italian hospital

CORSI Daniela, BORELLI Paola, BOIETTI Edoardo, GINTOLI Irene, FORNERO Giulio

Introduction

The Safety Walk Round (SWR) is a risk assessment technique designed to help management and leadership to decrease adverse events and improve workers attitudes about safety culture. The SWR consists in carrying out interviews with healthcare professionals and patients/caregivers to bring out problems relating to patient safety. In our hospital, SWR tool was integrated with the Safety-II approach, which enhances the successes and encourages the dissemination and sharing of good practices.

Purpose/Methods

During Covid-19 emergency, new safety rules were introduced in our hospital (AOU Città della Salute e della Scienza di Torino). Between May and July 2020, we used the SWR method to monitor the implementation of anti-contagion measures and new hospital organization. The pre-triage areas and the waiting rooms were evaluated as the areas at greater risk of crowding and contagion. The project was divided in three steps: observation of the identified areas, interviews with health workers and feedback of the troubleshooting.

Results

In the first phase, we observed 18 areas at risk of non-compliance with safety rules. Subsequently, we conducted interviews to share good practices and critical issues with the health operators. We found 23 critical issues in 14 different services. Then, we identified solutions to the issues with front-line staff contribution. At the end, we verified the application of the improvement actions shared during the meetings. The 77% of critical issues were completely solved.

Conclusions

The hospital staff encountered new difficulties and new fears during Covid-19 pandemic. SWR implementation was effective in involving health workers in safety promotion activities and sharing information between hospital managers and first-line operators. Furthermore, SWR was a useful tool to identify and share the needs and the issues of patients and health operators.

Contact: CORSI Daniela

AOU Città della salute e della scienza of Turin
Corso Bramante 88
10126 torino, dcorsi@cittadellasalute.to.it

Professional quality of life among nurses during the covid-19 epidemic

FILHABER Aliza, ZINI Mira, TIOMIN Inessa, LIVSCHITZ-RIVEN Ilana

Introduction

The covid-19 virus was declared a pandemic by the World Health Organization in March 2020. Nurses caring for the front are exposed to mental and physical strains that manifest impairment in professional quality of life (ProQOL) that combines the aspects of compassion satisfaction and compassion fatigue. Aim of the study: To examine the differences in the professional quality of life of nurses in the hospitalization system in Israel before and during the covid-19 period.

Purpose/Methods

Methods: A multicenter study, using a survey from December 2020 to February 2021, included nurses who worked over a year and full-time. Research tools: ProQOL, sociodemographic, covid-19 variables questionnaires and Global Rating (GR) question.

Results

The study included 207 nurses, age 42.3 years, seniority 16.92 years, 27% Master's degree. Examining the differences in the ProQOL of nurses in the hospitalization system in Israel before and during the epidemic, a significant decrease was found with a strong effect on the definition of ProQOL as measured in a single question (GR). There was no difference in the ProQOL among nurses in the inpatient setting in Israel who treated / did not treat Covid-19 patients, except for a significant satisfaction among nurses who treated Covid-19 patients. Training these nurses did not affect their ProQOL. The regression model for predicting general ProQOL during the covid-19 period found significant. age, professional seniority, academic education and good general ProQOL in the past together explained 49.8% of the variance in ProQOL during the epidemic.

Conclusions

The results of the present study indicate the benefits of the General ProQOL testing Tool are in multidimensional resolution and diagnosis of the dimensions of ProQOL. GR also has advantages and a high correlation to ProQOL

Contact: FILHABER aliza

KAPLAN MEDICAL CENTER
BOX#1, 76100 REHOVOT,
alizafilhaber@gmail.com

Improving the health awareness and status of nursing staff during the COVID-19 pandemic

YE Yu-Shi, YANG Pei-Ru, WU Jia-Min, HSU Hung-Yi

Introduction

During COVID-19 pandemic, nursing staff suffered from long-term high pressure and lots of physical and mental energy consumption. Existing research shows that during COVID-19

pandemic, pressure of nursing staff include: burden of caring for infected patients, social isolation, and state of immunity and health, will be seriously affected. Therefore, purpose of this study is to use multiple health promotion programs to improve health awareness and status of nursing staff during COVID-19 pandemic.

Purpose/Methods

The studying subjects were 18 nurses in one orthopedic ward of teaching hospital in central Taiwan. We implemented multi-dimensional intervention strategy, including: 1. Holistic education: provided physical, psychological, and spiritual guidance, understanding the coronavirus, effective self-protective behavior and psychology during the pandemic, nutrition needed by human body, and mindful diet. 2 Participate: members assisted in formulation of health plans and shared various nutrient utilization methods and effects. 3. empowerment: through learning and participation, members can empower themselves to control health and improve personal quality of life. 4. Sustainable evaluation: Used google questionnaires to investigate the satisfaction of before and after education, and record the changes in health status during 6 months.

Results

The intervention period of the project was from August 2020 to February 2021. After 6 months, the results were analyzed as follows: 1. The coronavirus cognition: increased from 48 to 88 points (83.3% improved). 2. The nutrition and efficacy knowledge: increased from 62 to 96 points (54.8% improved). 3. Effective epidemic prevention and health behaviors: increased from 60 to 88 points (46.6% improved). 4. After two vocational education and share the experience of participation with each other, the education satisfaction was increased from 78 to 98 points (25.6% improved).

Conclusions

This research aims to raise awareness among nursing staff of coronavirus and nutrition, as well as effective health behaviors to prevent epidemics. Through on-job education to teach the role of nutrients to enhance health behaviors related to epidemic prevention.

Contact: YE Yu-Shi

Tungs' Taichung MetroHarbor Hospital
43503 梧棲區, a0917515572@gmail.com

Sleeplessness and stress: The impact of the Covid19 pandemic on frontline workers

LYONS Ailsa, KILLEEN Joan, WALSH Caroline, KELLEHER Cecily C., FITZPATRICK Patricia

Introduction

There have been three major waves of COVID19 in Ireland to date, with frontline hospital staff severely challenged throughout the pandemic. The aim of this study was to identify the health status of nursing and healthcare assistant staff in the period between peak COVID waves in a large university hospital in Ireland.

Purpose/Methods

A survey was developed for staff, with questions on lifestyle behaviours, stress (Perceived Stress Scale) and wellbeing (WHO-5 Wellbeing Index); 459 surveys were completed (estimated 32.5% response). The survey was conducted between the second and third COVID19 waves in late 2020, and findings compared with recent national population annual lifestyle survey (NALS 2019).

Results

11.5% smoked, lower than NALS (17%); 4.3% currently used and 6.6% had ever tried e-cig compared to 5% and 12% in the NALS. Healthy weight by BMI was higher than the NALS (43% vs 37%) but proportions in the obese category were similar (22.4% v 23%). Over half, 54.7%, reported getting 6-7 hours sleep, similar to 7.1 hours average sleep in the NALS; 37.6% of respondents reported no sleep difficulties, compared with 76% fairly or very good sleep in NALS. Most participants showed moderate perceived stress (64.2%); 8.4% high stress. Mean WHO-5 Wellbeing Index score was 14.4, with 34.5% of scores below 13, indicating poor wellbeing.

Conclusions

For smoking, e-cig use and weight, hospital staff demonstrated healthier behaviours; however, there was greater reported levels of poor sleep, high stress and lower levels of overall wellbeing than the NALS general population. Following the study measures introduced include free online Pilates classes, free online national Stress Control Programme, promotion of the Employee Assistance Programme, new "key skills in mindfulness" course, and occupational psychologist-delivered and recorded short sessions on self-care.

Contact: FITZPATRICK Patricia

St Vincent's University Hospital & University College Dublin
Elm Park Nutley Lane
Dublin 4, patricia.fitzpatrick@ucd.ie

Oral session 2.4: Age-friendly health care

The Prevalence Of Hyperglycemia in the Elderly Health Examination Data and Corresponding Health Care Countermeasures

LEE Meng-Szu, WU Ming-Tsang, DAI Chia-Yen

Introduction

Early detection and control of hyperglycemia can further prevent the development of diabetes. The 65 year elders in Taiwan have a free health checkup every year. This study statistically analyzed the prevalence of hyperglycemia and the main influencing factors in the elderly health examination data of a hospital, and then developed the corresponding health care strategies, further to achieve the purpose of Preventive Medicine-"detection of diseases in time and early treatment".

Purpose/Methods

Using the data of 23014 elderly health examination (including age, gender, height, waist circumference, body weight, BMI, pulse, systolic blood pressure, diastolic blood pressure and fasting blood sugar), the prevalence of hyperglycemia ($\geq 100\text{mg/dl}$) was statistically analyzed by Minitab V17 software, and the related influencing factors were analyzed by using the multivariate step-wise logistic regression method. Subsequently, the corresponding health care countermeasures were proposed.

Results

The statistical results showed that the average age of all elderly was 72.2 ± 6.2 years (49.1% for women and 50.9% for men), and average fasting blood glucose was $107.6 \pm 25.0\text{mg/dl}$. The prevalence of hyperglycemia in these elderly was 56.2% (13.1% reaching the diabetes). The logistic regression analysis showed that the related significant factors were: weight, waist circumference, pulse, and systolic blood pressure ($p < 0.001$). Finally, the corresponding health care countermeasures was further established.

Conclusions

Based on the health examination data of 23014 elderly people, the prevalence of hyperglycemia was statistically analyzed as 56.2%, in which weight, waist circumference, pulse, and systolic blood pressure were the significantly impact factors, and then the corresponding health care countermeasures were established as the reference for the implementation of health promotion management of the elderly who had the hyperglycemia problem.

Comments

This study can be used as a reference for the implementation of health promotion management for the elderly with the hyperglycemia problem.

Contact: LEE Meng-Szu

Kaohsiung Medical University Hospital, Kaohsiung Medical University
No.100, Tzyou 1st Road, 807 Kaohsiung,
vvvykimo@gmail.com

Correlation between dietary intake and improvement of muscle strength after community elderly nutrition guidance intervention

LAI Chin Lien**Introduction**

At present, the average life expectancy of Taiwanese people has increased. Taiwan has entered the "aged society" and will enter the "hyper-aged society" by 2025. Is the quality and quantity of dietary intake related to the prevention of age-related diseases adequate? Strength maintenance is an issue that needs attention

Purpose/Methods

There are 72 people with age over 65 recruited from the community care base. During the four month period, a dietitian guides a healthy diet and elderly diet production course, including awareness of food types and intake for the elderly, and methods for preparing elderly diet Rehabilitation

instructor guides the elderly's exercise and muscle strengthening training course. The nutrition part of the pre- and post-course tests uses a mini nutrition questionnaire. The pre- and post-test part of the muscle is assessed by the fitness teacher's fitness grip test.

Results

After the community elders were involved in nutrition guidance, the ratio of dietary protein intake to 80% of the recommended amount was calculated by using the "mini nutrition questionnaire" before and after measurement, which was an increase of 11.5% from 52% to 58% after the test. In the community, the fitness strength of the elderly increased by 5%, and the grip strength increased from the average of 8.6 to 9.1.

Conclusions

Integrate community resources, hospital staff, nutritionists, and rehabilitation practitioners into the community to help the elderly improve their healthy diet and increase total dietary calories and protein intake. Rehabilitation teachers assist community elders in physical fitness and effective muscle strength training. Through pre- and post-measurement, both dietary intake and muscle strength have increased. Therefore, adequate dietary intake after nutrition guidance intervention is related to muscle strength improvement

Contact: CHIN LIEN lai

cheng ching hospital
no.139, ping-tien street,
taichung, lien4349@gmail.com

Age-friendly hospitals and health services: Five dimensions for practical implementation

KOELLDORFER Benjamin, METZLER Birgit, BINDER Siegfried

Introduction

Forecasts for Austria indicate that the proportion of people over 65 will rise from 19 % in 2019 to 27 % in 2050. The number of elderly and very old people coming into the health system as patients with specific clinical pictures and complications is constantly increasing. Also, aging employees in health services are an aspect that requires qualified handling. Against this background, the Austrian HPH Network is developing a recognition procedure for age-friendly health services.

Purpose/Methods

Central component of this recognition procedure is an instrument for the self-assessment of the age-friendliness of health services. Age-friendliness of health services is defined by five dimensions. The first four dimensions are based on the Taiwanese Framework for Age-friendly Hospitals and Health Services. The fifth dimension is based on a selection of indicators of the Austrian grade label NESTORGOLD for the recognition of age-friendly companies and organizations, therefore brings a staff focus into the instrument.

Results

The self-assessment instrument has been piloted by three member institutions of the Austrian HPH network. Based on the

piloting experiences, the first steps of the recognition procedure were defined in a participatory process with the users.

Conclusions

In a next step, the recognition procedure will be elaborated and piloted. The aim is that the first awards can be presented by the end of this year and that age-friendly health services are implemented as a thematic focus within the Austrian network.

Comments

re-activated abstract from Seoul 2020

Contact: METZLER Birgit

Gesundheit Österreich GmbH – Austrian National Public Health Institute
Stubenring 6, 1010 Vienna,
birgit.metzler@goeg.at

The impact of COVID-19 on healthcare facilities for older adults

**SUN Tianzhi, MANGILI Silvia,
CAPOLOGO Stefano**

Introduction

Covid-19 drew the attention of researchers to health problems in nursing homes and healthcare facilities for older adults. Often, elderly who live in those settings often have high levels of impairment and chronic illness, so they are more susceptible to coronavirus. Therefore, a Systematic Literature Review was conducted to explore which built environment mostly impacts the health and well-being of residents during the pandemic period.

Purpose/Methods

Relevant articles were identified by searching on the SCOPUS and Web of Science databases. Studies based on the impact of the built environment on elderly residents living in healthcare facilities during the COVID-19 period were included. Articles focusing solely on the clinic aspect were excluded.

Results

The initial research found out 197 papers, and, after the application of eligibility criteria and the full-text reading, 13 studies were selected. Almost two-thirds (8) are theoretical studies. Physical health like infection control has emerged as the most common concern (11) as well as mortality. Built environment factors, such as location, size of facility, type of rooms, number of residents, air quality, temperature, localization of office space, were also presented as risk factors for the health and well-being of users.

Conclusions

The research shows a lack of studies about mental health, while 11 studies focus on physical health, only 2 mentioned mental perspective, even if it is one of the main factors influencing the well-being of vulnerable people, and consequently, more research with regards to emergency pandemic need to be explored.

Contact: SUN Tianzhi

Politecnico di Milano
Via Padova, 2, 20133 Milan,
tianzhi.sun@polimi.it

Oral session 3.1: Workshop

„HPH and Health Literate Health Care Organizations“ Implementing and Piloting the “International Self-Assessment Tool for Organizational Health Literacy (Responsiveness) of Hospitals (OHL-Hos)”

PELIKAN Jürgen, LEVIN-ZAMIR Diane, NOWAK Peter, STRASSMAYR Christa

Introduction

To present and discuss the “International Self-Assessment Tool Organizational Health Literacy in health care organizations (hospitals)” developed by a HPH international Working Group on “Health Promoting Hospitals and Health Literate Health Care Organizations (HPH & HLO).”

Purpose/Methods

To discuss and plan translations of the instrument in further languages and piloting and validating it in different countries / networks of HPH.

Results

First results from the Austrian pilot will be presented.

Conclusions

The session will start with a short introduction by participants. Then inputs on the background on measuring organizational health literacy/health literate organizations /organizational health literacy responsiveness will be provided and the self-assessment tool will be presented. First results from the Austrian pilot will be presented. Depending on number of participants, either small working groups will be established, or single participants will be asked to discuss a number of questions concerning the tool and its possible implementation in hospitals and other health care services. Finally, next steps for translating, piloting, and validating the instrument in different countries will be discussed in the plenary.

Contact:

Gesundheit Österreich GmbH – Austrian National Public Health Institute
Stubenring 6, 1010 Vienna,
Christa.Strassmayr@goeg.at

Oral session 3.2: Health care management systems, structures and processes to optimize health gain for patients, staff and populations served II

A Platform for Equal Health and Health Care

ELGSTRAND Maria, LARSSON Annika, KRISTENSON Margareta

Introduction

The aim of HPH is to "orient governance models, structures, processes and culture to optimize health gains of patients, staff and populations served". To achieve this we need to systematically monitor health status in the catchment area as a basis for needs assessment and planning of services, and evaluate procedures for the improvement of health outcomes. This way of working has been central in the Region Östergötland for a long time. However, the responsibility for these tasks has been divided between many different departments, leading to poor synchronization and, especially, loss of a holistic view.

Purpose/Methods

To better support this development, a Platform for Equal Health and Health Care was formed, with representatives from involved departments, and with the objective to coordinate professional collaboration, increase synergies and optimize use of resources. The aim is to link competences in public health and health care management, for in health needs analyses, planning and follow-up of from a holistic perspective, to support health promotion initiatives, and give knowledge-based information for decision makers that contribute for equal health and health care.

Results

The platform has during the first year had three specific objectives; 1. The development of "Area diagnoses" to support primary care in their responsibility for population health in their catchment area. The web-based instrument enables comparisons of health determinants and health status between groups and local areas. 2: Coordinating the new Public Health Strategy, focusing equity in health, for the Region in collaboration with the 17 local communities and the civic society. The 3: Collaboration with cardiologists in assessing equity in Health Care in terms of socioeconomic differences in processes and outcome for patients with myocardial infarction.

Conclusions

The model of working in the platform has been very helpful in synchronizing our work within the region and in giving better knowledge-based information for decision makers.

Contact: KRISTENSON Margareta

Dep of Medicine and Health
Hälsan Hus, s 58183 Linköping,
margareta.kristenson@liu.se

The Influence of the HPH Catalan network in the incorporation of HPH Standards in the Accreditation Model of Health Department of Catalan Government

SANTIÑÀ Manel, BRIANSÓ Maria, JUVINYÀ Dolors, FERNÁNDEZ Mònica, IBAÑEZ Rocío, PÉREZ Anna Carol, PUJÜLA Jordi, SIMÓN Rosa, TARBAL Arian, VICENTE Mireia, INIESTA Cristina

Introduction

The HPH-Catalonia was created in 2008, currently 21 healthcare organizations are involved in its activities. Our Strategic Plan is focused on Health Promotion Standards. The action plan is developing with the aim to influence the Governments Models of the Healthcare Organizations to health orientation of health care principles and strategies of health promotion. The aim of this communication is to explain the process to influence the Catalan Health Department to introduce health promotion standards in the new Accreditation Hospital Model.

Purpose/Methods

We have a Working Group who works with the aim to facilitate the implementation of health promotion standards in the healthcare organizations. We discussed this theme with the Public Health Agency and with the Accreditation Service of Health Department of Catalonia. We then prepared and sent a proposal to the Accreditation Service in which we prioritized those standards that we considered most relevant and that we considered should be incorporated into the Accreditation model.

Results

We have achieved the incorporation of the 8 standards in the Accreditation model of health Department of Catalonia. 4 standards are to demonstrating organizational commitment for HPH (HPH Std 1) 1 standard is to ensuring access to the service (HPH Std 2) 1 is to enhancing people-centered health care and user involvement (HPH Std 3) 1 is to creating a healthy workplace and healthy setting (HPH Std 4) 1 is to promoting health in the wider society (HPH Std 5)

Conclusions

The inclusion of the HPH standards adapted to the specificities of the Catalan model facilitates the implementation of work in health promotion in acute care hospitals. The Catalan HPH network has established itself as a benchmark in health promotion in Catalonia. We need to continue working on the introduction of the health promotion standards in the other types of healthcare organizations: primary health care, long term centers, mental health centers.

Contact: SANTIÑÀ Manel
Hospital Clinic of Barcelona
Villarroel, Barcelona,
msantina@clinic.cat

Primary care and public health services: Service specification of health promotion and disease prevention services in primary care

ROJATZ Daniela, NOWAK Peter

Introduction

The integration of essential public health services into primary care is a central component of the comprehensive primary health care approach. Since public health services and primary care do overlap in the field of health promotion and disease prevention services, these services provide a good starting point for the integration. Therefore, the question arises on to which services should be integrated into or delivered by primary care. In the framework of the WHO-CC-Health Promoting Hospitals and Health Care a guidance document was developed with the aim to support service specifications and service level agreements in WHO member states.

Purpose/Methods

To identify and compile health promotion and disease prevention services to be provided in primary care, the following steps were applied in an iterative manner: » Search for health promotion and disease prevention services in primary care » Selection of respective services based on defined criteria » Compilation of the services along the Essential Public Health Operations » Expert consultation to obtain feedback on the compilation of services and advice on additional services

Results

Preliminary results: More than 160 health promotion and disease prevention services were compiled as a basis for discussion of national or regional service-level agreements on primary care services. Each service is briefly described to support a common understanding. In addition, it is emphasized where cooperation with public health institutions is indicated.

Conclusions

The incorporation of the compilation in discussions and negotiations at country level must be tailored to the specific country context. The negotiated service level agreement is an important step towards the realizations of a strong integration of public health services into primary care.

Contact: ROJATZ Daniela

Gesundheit Österreich GmbH [Austrian Public Health Institute]
Stubenring 6, 1010 Vienna,
daniela.rojatz@goeg.at

Counteracting the Global Syndemic building on community engagement

MAGNUSSON Maria

Introduction

Health problems related to life style habits constitute a significant part of the Global Burden of Disease. It is also true that global systems for food and transport add to individual's burden of disease worldwide, most obvious among disadvantaged

groups and in impoverished populations. Agenda2030 highlights the need for change on systemic levels. To decrease the health gap, participation from those most afflicted is fundamental. How can public health workers implement perspectives of systemic change in health communication with the public?

Purpose/Methods

The concept Global Syndemics (GS) signifies that the pandemics obesity, undernutrition and climate change are intertwined, depending on societal structures, and that engagement on many levels is needed to counteract them. GS was studied in the Public Health Unit of a community hospital, with a commission to contribute to increased health equity. Focus was on how to implement this perspective in the ongoing communication with the public. A three steps plan was formed: 1) Introduce GS in relation to health issues that are highlighted by the community 2) Confirm that it is possible to act for change and share examples. 3) Suggest and facilitate action for change

Results

Step one was performed 2019 and early 2020 as part of everyday public health work in connection with talk in group meetings about health issues (ie body weight, childrens health, sexual health, food habits). Structural aspects proved to engage many participants. Thoughts and reflections were exchanged. Discussions emerged about advertisement, group pressure, supplies in food retailers, costs of healthy food. From March 2020 the covid19 pandemic has put focus on other health issues and thus a brake has been applied to the processes.

Conclusions

Relating individual life style habits to systemic issues may foster engagement and a strive for participation. This can be beneficial for individual's health and contribute to urgent changes on structural levels.

Contact: MAGNUSSON Maria

SV Hospital Group/Västra Götaland Region
Halmatorget 1, 424 65 Angered,
maria.b.magnusson@vgregion.se

Oral session 3.3: Prevention of NCDs and chronic disease management II

Systemic education program development and education activities for patients undergoing catheterization

LEE Jungmin

Introduction

With the age of aging, the number of elderly people with urination disorders is increasing. According to the data from the Health Insurance Review and Assessment Service, the number of patients treated with neurogenic bladder is increasing by 8 percent annually (2014-2018y). Among those diagnosed with neurogenic bladder, there is an increasing number of patients who are not able to urinate at all and who are urinating using

urinary catheter. Most people who urinate using a urinary catheter have a lot of elderly people, and the understanding and management of urine catheter are poor. This affects the patient's poor health and poor quality of life. So we have developed and educated systematic education on catheter management for patient.

Purpose/Methods

We developed an educational program based on the literature and made leaflets and bladder model. From March 2019 to Nov 2019, we educated 70 patients who had a urinary catheter. We provided patients with systematic educational leaflets. In addition, nurse trained patients using bladder models.

Results

Systematic urinary catheter educational program helped to patient. The result showed an improvement of 11.4% in understanding of education, 22.8% in the implementation of education content, and 8% in the evaluation of quality of life.

Conclusions

Systematic education and patient education through various methods (leaflets, bladder model, 1:1 training etc.) were found to be effective by improving understanding among the elderly. This will help the patient's health care.

Comments

Re-activated Seoul 2020 abstract

Contact: LEE jungmin

Seoul Metropolitan Government-Seoul National University,
Boramae Medical Center, 20, Boramae-ro 5-gil, Dongjak-gu
07061 Seoul, dury6490@gmail.com

The effect of applying interdisciplinary team nursing model in the clinical care of patients with pulmonary obstruction

ZHONG Rui-Ying

Introduction

The pulmonary obstruction often lasts decades of years. With the progress of the disease, the interval of each attack will get shorter and shorter, the symptoms will become more and more serious and the function of daily activities will decline gradually. The repeated recurrence and hospitalization will also cause physical, mental and economic pressure on both the patients and their families, and even lead to depression, anxiety and other psychological problems, which seriously affect their quality of life. Studies have shown that patients with chronic obstructive pulmonary disease participate in self-management programs, which can reduce the occurrence of dyspnea and reduce the readmission rate by 36% (Effing et al., 2009). Many studies have confirmed that self-management behavior or changing health care behavior is the most effective and cost-effective way for COPD patients to prevent disease deterioration or delay the progression of the disease (Louise et al., 2018). Meanwhile, it also plays a mediating role in influencing the consequences of disease adaptation, which includes: continuous self-care, such as good health behavior, symptom management and compliance with doctors' advice, will bring positive disease adaptation (Ryan

& Sawin, 2009), and improve the quality of life, health and happiness in the long run (CRAMM & Nieboer, 2012; Riegel et al., 2012). Therefore, it is necessary to fully implement the interdisciplinary team care model, with the aim to achieve the following three objectives: I. All the professional teams get involved in the care of patients and provide physiological, psychological, social and spiritual holistic care; II. Follow the treatment guidelines to achieve medical care consistency; III. Increase the interaction between patients and their families and take the initiative to participate in the discussion of disease condition and treatment, so as to reduce the acute deterioration frequency of COPD patients and unplanned readmission rate within 14 days and further improve the medical care quality.

Purpose/Methods

The admission date is from January 1, 2020 to December 31, 2020, and the admission conditions are as follows: patients aged 40 or above, who meet COPD GOLD guideline for moderate-severe (Group B, C and D) patients, agree with this care plan mode and sign the care plan instruction. Exclusion criteria: patients under 40 years old combined with major diseases, such as heart failure, liver failure, end-stage renal disease, respiratory failure, cerebrovascular disease combined with difficulty in moving, stay in bed bedridden or unconsciousness, or metastatic or deteriorated cancers, etc. Termination conditions: the patients losing contact, transfer to another hospital for treatment, acute respiratory failure combined with the use of respirator, exclusion conditions occurring during the period of admission, unwillingness to continue to participate in or cooperate with the clinical care mode, and signed the withdrawal instruction. Closing conditions: COPD assessment test result (CAT) doesn't rise within six months and the hospitalizations due to acute attack within one year was no more than 2 times. There are 8 monitoring indexes, such as COPD assessment test (CAT), Modified Medical Research Council (mMRC) dyspnea scale, pulmonary rehabilitation participation rate, referral rate for smoking cessation, pneumovax injection rate, nutrition assessment and health and education implementation rate of COPD patients with BMI<21 kg/m², patients and their families' satisfaction and unplanned readmission rate within 14 days.

Results

The number of eligible patients is 101. I. The assessment score of COPD decreases from 28 to less than 10; II. The mMRC dyspnea scale is reduced from Grade 3 to below Grade 2; III. Pulmonary rehabilitation participation rate: the number of people with the progress distance greater than 50 meters is 12, and the physical activity index improved from less than 46% in the early stage to 91% in the late stage. IV. Referral rate for smoking cessation increases from 88% to 100%. V. Pneumovax injection rate increases from 55.6% to 87.5%. VI. The implementation rate of nutrition assessment and health education for COPD patients with BMI < 21 kg / m² rises from 70% to 100%. VII. The patients and their families' satisfaction degree was over 90%. VIII. The unplanned readmission rate decreases to 1.24% within 14 days.

Conclusions

As pulmonary obstruction is chronic and irreversible, patients have to coexist with the disease for a long time and they usually have complex physical and psychosocial needs. The interdisciplinary team can actively provide appropriate medical care and self-management, and learn to help themselves maintain health stability. When the patients change their health behavior, medical staff can provide enough emotional support, which can make the patients control their own diseases better, so as to alleviate dyspnea and improve the quality of life, which is also an effective means to improve medical outcome and

effectively reduce the number of hospitalizations (Zwerink et al., 2014). The patient-centered interdisciplinary team nursing model is very helpful to improve the clinical care quality of patients with pulmonary obstruction.

Contact: ZHONG RUI-YING

Taipei Tzu Chi Hospital
No.289, Jianguo Rd., Xindian Dist., New Taipei City, Taiwan
(R.O.C.), 231405 New Taipei City,
avril00617@yahoo.com.tw

Cancer prevention and environmental health promotion in the regional comprehensive cancer center, the Léon Bérard Cancer Center

CARRETIER Julien, ROZENBERG Margaux, GIRARD Emeline, TARDY Juliette, LASSET Christine, FERVERS Béatrice

Introduction

The regional comprehensive cancer center Centre Léon Bérard commits to the prevention and promotion of environmental health. First regional cancer center, located in Lyon, it is pursuing an ambitious policy in promoting cancer prevention in a context where 40% of cancers could be avoided through behavioral changes. The objective is to promote a global approach to environment and health within the Centre Léon Bérard by responding to cancer patient needs, users and health professionals.

Purpose/Methods

Our 2021-2025 medico-scientific establishment project aims to pursue and develop a more visible integrated prevention strategy with 3 planned actions : 1. promotion of a new "tobacco-free health center" program for patients, relatives and employees, with individual and collective support interventions to help quit smoking and better live without tobacco; 2. developement of communication campaigns on cancer prevention and avoidable risk factors; 3. Structuring and opening a cancer prevention center with on-site and off-site activities in collaboration with local stakeholders.

Results

We have developed new missions: prevention support and medical care of cancer risk factors before, during and after cancer, by participating in the comprehensive and personalized follow-up of cancer patient; the development of evidence-based materials for users and a reference website on cancer and environment, coupled with educational interventions with target audiences (young people in particular, employees, cancer patient, associations...).

Conclusions

Interdisciplinary research on environmental exposures and cancer prevention is conducted crossing epidemiology, health geography, expology, human and social sciences and public health, in order to contribute to the process of evaluating the activities and preventive clinical practices implemented. Through

this global approach, we intend to help reduce social, environmental and territorial health inequalities.

Contact: CARRETIER Julien

Centre Léon Bérard

Département Prévention Cancer Environnement, 28 rue

Laennec, 69009 Lyon,

j.carretier@wanadoo.fr

Prognostic effect of implementation of the mass low-dose computed tomography lung cancer screening program : a hospital-based cohort study

WU Fu-Zong, HUANG Yi-Luan, WU Yun-Ju, TANG En-Kuei, WU Ming-Ting, CHEN Chi-Shen, LIN Yun-Pei, CHEN Jin-Shuen

Introduction

Low-dose computed tomography lung cancer screening aims to detect early-stage lung cancers in order to decrease the incidence of advanced-stage lung cancers and to reduce lung cancer mortality.

Purpose/Methods

We analyzed the time trends of lung cancer stage distribution and mortality rates after the gradual implementation of the low-dose computed tomography lung cancer screening in a hospital-based cohort. Using the hospital-based cancer registry data on lung cancer number and death from 2007 to 2014, we aim to evaluate the trends in stage distribution and mortality rate after the gradual implementation of low-dose computed tomography lung cancer screening program over recent years.

Results

For the 1-year mortality rate, the mortality rate decreased gradually from 48.16 to 37.04% between 2007 and 2014. For the 5-year mortality rate, the mortality rate decreased gradually from 88.49 to 69.44% between 2007 and 2014. There was a gradual decrease in stage IV lung cancer with the corresponding sharp increase in stage I early lung cancer after following the implementation of the large volume of the low-dose computed tomography examination between the years 2011 and 2014.

Conclusions

In conclusion, these results suggest that the gradual implementation of low-dose computed tomography lung cancer screening program could lead to a remarkable decrease in lung cancer mortality and a remarkable stage shift in the trend over time in this hospital-based cohort.

Contact: WU fu-zong

Kaohsiung Veterans General Hospital

813414 Kaohsiung Veterans General Hospital 386 Ta-Chung 1st

RD. Kaohsiung, Taiwan, ROC

813414 Kaohsiung, cmvuwu1029@gmail.com

Oral session 3.4: Supporting patient behavior change and healthy lifestyles

Adapted internet-based training program improves exercise accessibility for people with intellectual disabilities

VIKBERG Sanna, HÖLLTÄ Jessica, ZINGMARK Magnus, FLYGARE WALLÉN Eva, HANSEN Elisabet, NORDSTRÖM Anna, OHLSSON Marie

Introduction

Individuals with intellectual disability (ID) are less physically active than people without ID, and rarely or never reach the recommended daily dose of physical activity level. People with ID have a higher BMI than their peers and therefore a higher risk of obesity causing cardiovascular diseases. The overall objective was to determine the effectiveness on health and user experience of a 12-week, internet-based training program, customized for people with ID.

Purpose/Methods

Participants with ID living in communal settings (n=27, 48% female, age = 36.4±9.56 years) were recruited for a training study including 50 minutes training 3 times a week in 12 weeks. Staff working with these participants (n=7, 57% female) were recruited for interviews. Questionnaires were used to evaluate enjoyment, quality of life and physical activity level, along with interviews. Body composition was measured as well as waist circumference.

Results

This study showed that 85% of the participants completed the web-based training. The level of physical activity (PA) increased during this period and positive changes in health outcomes were observed, for example a significant decrease in fat mass by a mean of 1.9kg ±2.4. The study also highlighted barriers and facilitators for people with ID to use web-based training, along with perspectives and experiences on health and exercise among the staff within the supported housings.

Conclusions

A web-based training program is a new way to increase level of PA for people with ID. This study showed that web-based training program is an effective tool to improve health parameters, reduces barriers such as transport. Moreover, it is an easy way for staff to enhance PA in their work. This study presents how web-based training was appreciated by many but not all participants with ID which would probably be the same for people in general. The study was performed during the Covid-19 pandemic, which might have influenced the interest of the study in a positive manner.

Contact: VIKBERG Sanna

Swedish Winter Sports Research Centre, Department of Health Science, Mid Sweden, Campus Östersund, Hus D 831 25

83125 Östersund, sanna.vikberg@miun.se

Promoting physical activity among health workers: evaluation of an intervention in a health promoting university hospital in France

LADNER Joel, GODEFROY Clémence, RIDEL Catia

Introduction

Rouen University Hospital implements a policy of health promoting hospital. The objective was to assess prospectively the impact of an intervention of physical activity promotion among hospital health workers (HW) over a period of six months.

Purpose/Methods

HW, gathered in a team (n=4-5) measured their physical activity with a specific application on their smartphones on a six-months period (2019-20). Socio-demographic information, characteristics on type of health work, quality of life and physical activity level using the Ricci and Gagnon score were collected. The number of steps was prospectively collected by the smartphone application.

Results

A total of 534 HW were included in the cohort. The sex ratio M:W was 0.16. The mean age was 39.6 years (SD=9.7). Ricci & Gagnon tests showed that before the intervention, that 7.8% of HW were classified as inactive, 59.7% was active and 32.5% very active. Regarding the evolution of daily steps, there was a significant progression at M6: a mean of +1,700 steps during the study period, with an average of 6,923 steps per day at M0 and 8,626 steps per day at M6 (+1,703/day). Similarly, the part of active HW (+10,000 steps/day) increased of 20 points and the part of weakly active HW or even sedentary HW decreased of 18 points. More than 8 on 10 HW evaluated as very dynamic and attractive the intervention (Likert scale >3/5). The "team spirit" was reported as a source of motivation for 68.0% of HW; 62.7% of respondents answered favourably about the opportunity with this action to exchange more with his co-workers.

Conclusions

The study shows a significant increase in the number of daily steps measured objectively using an smartphone app during six months of intervention. The team spirit and challenge of physical activity level are source of motivation between HW and could be an useful support in a context a heavy workload as COVID-19 pandemic. Further researches are needed to determine if these changes are sustainable over a long period of time.

Contact: LADNER Joel

Rouen University Hospital
DEPS HCN CHU Rouen France
76000 Rouen, joel.ladner@univ-rouen.fr

Barriers and facilitators for implementing physical exercise among caregivers in disability long term care facilities

LIN Jin-Ding, LIN Lan-Ping, LIN Chia-Chen, HUANG Hui-Ting

Introduction

Caregivers reported significantly greater anxiety, depression, stress, and negative health symptoms than others. Physical exercise has positive health benefits for people of all ages, and it can relieve stress, depression and burdensome feelings in caregivers, as well. This study aims to describe physical exercise profiles among caregivers working in long term care facilities and to examine the barriers and facilitators with their physical exercise implementation.

Purpose/Methods

Purposive sampling was conducted to recruit 455 caregivers of adults with disabilities in seven long-term care institutions in Taiwan. A total of 327 caregivers who provided complete data on their personal demographic characteristics, health and working status, and exercise were included in the analyses. Multivariate analysis of multiple logistic regression method, odds ratio and 95% confidence interval were performed to examine the factors associated with participation in regular physical exercise among the respondents.

Results

The results showed that 71.9% of caregivers undertook physical exercise weekly; and the main types included walking (61.5%), house cleaning (36.4%), Nordic walking (25.1%), general stretching (24.8%), and cycling (20.5%). After adjusting for factors including personal demographics, BMI and health status, multiple logistic regression models indicated that caregivers reporting more working days per week (>5 days vs. ≤5 days, OR=0.549, 95% CI=0.31-0.98) were less likely to participate in regular physical exercise than their counterparts.

Conclusions

To improve physical exercise among caregivers, we should deliver a feasible and successful health promotion counseling program aimed at improving physical exercise levels among highly stressed and burdened caregivers. This study highlights that caregivers are in need of interventions based on the factors of barriers and facilitators to increase physical exercise implementation, and to improve their health.

Contact: LIN Chia Chen

Taiwan Society of HPH
3F., No.400, Sec.2, Bade Rd
10556 Taipei, hphthwmail@gmail.com

Association of Calcaneal Quantitative Ultrasound with Osteoporosis Self-Assessment Tool for Asians and Fracture Risk Assessment Tool in Identifying Risk of Osteoporosis

CHEN Hong Jhe, HSUEH Kuang-Chieh

Introduction

Osteoporosis is a major public health problem with a severe health impact to Taiwanese. The purpose of this study was to determine the effect of an educational intervention that includes information about the knowledge of preventing osteoporosis in urban and rural area in southern Taiwan

Purpose/Methods

We included adults aged above 50 years. Subjects who have shorter life expectancy or decline to join our program were excluded. The Fracture risk assessment tool (FRAX) and osteoporosis self-assessment tool for Asians (OSTA) questionnaires were evaluated. Calcaneal quantitative ultrasound (QUS) was applied for screening of osteoporosis. The participants completed the questionnaire that measured their knowledge of preventing osteoporosis at baseline and then received information about the risk of fracture and individual education. Fracture risk was determined by FRAX. The post-survey was conducted 3 and 6 months later. The pretest results were compared to the post-test results.

Results

In this study, 426 subjects (128 men and 296 women) were enrolled. After the educational intervention, the mean osteoporosis knowledge score significantly increased from 28.5 ± 4.8 in pre-education (baseline) to 31.5 ± 3.37 at post-education ($P < 0.001$). When comparing the pre- and post-education fracture risk scores, a mild difference was found between the "rural" and "urban" groups.

Conclusions

Simple educational intervention is effective in increasing osteoporosis knowledge among Taiwanese. After our education program, a significant prevention acknowledges was seen except weight bearing exercise and vitamin D supplement. Clinicians should pay particular attention to these two osteoporosis prevention topics.

Contact:

trickleman@gmail.com

An innovative approach to health promotion: creating a comprehensive, co-produced programme to support sustainable lifestyle changes

STEIN K. Viktoria, LACKINGER Christian, WIESINGER Thomas, DORNER Thomas E.

Introduction

Many health promotion programmes only look at one aspect of health promotion (e.g. nutrition) and fail to take into account the work- and family lives of the participants. Another problem is follow-up and support for participants, when they do not achieve the intended outcomes. The Social Insurance Fund for Public Service, Railway and Mining Industries has built a residential health promotion facility in Austria with the aim to provide a comprehensive evidence-based health promotion programme. The target group is all people who, regardless of their health status and the presence of diseases, are ready to make their lifestyle more health-oriented.

Purpose/Methods

The 3 months programme offers measures in five areas: promoting physical activity, optimizing nutrition, strengthening mental health, increasing social capital, and improving health literacy. The programme combines a two-week initial stay and a follow-up week three months later. In between, participants follow a co-designed programme and receive online support, if need be. The individual programmes are based on personal goals, which are set at the beginning of the initial stay, revised for the three months in between the stays, and finally checked during the follow-up week. They also formulate goals for the long-run and learn how to monitor and adjust their goals accordingly. The focus is on increasing resources and on overcoming barriers by offering activities and interventions in all five areas.

Results

The first participants will start the programme in September. There is a continuous evaluation framework, using the extensive surveys and clinical data collected before and during the programme, which will provide evidence on the effectiveness of holistic health promotion programmes.

Conclusions

This project combines the advantages of comprehensive, person-centred health promotion, and a residential stay. It is a pioneering social insurance project for sustainable health promotion and integrated care.

Contact: STEIN Viktoria

katharinaviktoria.stein@bvaeb.at

Oral session 4.1: Governance models, culture, policy and leadership for HPH

Health promotion and environmental health acculturation in Gustave Roussy, a European cancer center

BERKANE Khalida, BORDENAVE Lauriane, DELALOGUE Suzette, BASCOUL Marie

Introduction

Cancer prevention is one of the major challenges facing our societies. As part of its new institutional strategic project from 2020 to 2030, Gustave Roussy Cancer Campus aims to become a public health player that drives change. This institution, entirely dedicated to treatment, research and teaching in the field of oncology, receives 250,000 patients/year and employs 3,200 people. A new health promotion policy is built around three main axes: - The INTERCEPTION program for personalized cancer prevention - A tobacco-free hospital policy - Exemplary sustainable development.

Purpose/Methods

The INTERCEPTION program is based on the identification of increased risk of cancer in people via an online software program, an on-site Interception Day (consultations and awareness and education workshops) and a personalized prevention and screening follow-up plan. The Tobacco Free Hospital policy has been certified and guarantees a ban on smoking in the entire hospital, combined with smoking cessation programs for patients, relatives and employees. The sustainable development committee (GREEN project) has identified eight areas for improvement to develop a solid "sustainable health" model: water, food, waste management, energy optimization, mobility, greening, digital sobriety and responsible purchasing.

Results

A monitoring plan will allow the settlement project to produce a annual activity report and to set up improvement actions so that the program can positively involve.

Conclusions

Gustave Roussy explores the fundamental pillars of a new sustainable health: reducing the demand for care through prevention, optimizing patient care by ensuring appropriate care and avoiding unnecessary care and actively decarbonizing the hospital.

Contact: BERKANE Khalida

Hopital Gustave Roussy, 114 rue Edouard Vaillant
94805 Cade Villejuif, khalida.berkane@gustaveroussy.fr

Writing and implementing the HPH worklines: the setting based approach in practice

AGUZZOLI Cristina, DE MONTE Ariella, MINEN Donatella, SELLERI Isabella, PORTOLAN Patrizia, CONTE Alessandro, GOBBATO Carlo Antonio, CAMILLI Andrea, FEDELE Roberta, GIACOMINI Luisa, PASCUTTINI Elide, VALENTINI Mariagrazia, RUSSIAN Stefano, ZORATTI Raffaele, LARDIERI Gerardina, LA DIEGA Amedeo

Introduction

The Friuli Venezia Giulia Region, through its HPH Coordination, has joined the international HPH Network in a unified manner, therefore the participation of public company in the activities is to be considered implicit; the adhesion of accredited private providers remains voluntary, albeit strongly desired. Since 2018, the regional planning lines in Friuli Venezia Giulia have a line dedicated to health promotion according to the HPH strategy.

Purpose/Methods

Each year, since 2018, in december the Regional HPH Coordination holds the regional HPH conference, to celebrate the goals achieved and to plan the next activities. The new action plan is then reviewed by the top regional management and then formally adopted, in the following year, by the political governance bodies. From this document emerges the commitment for the HPH members, in constant contact with the HPH CC ARCS for monitoring the action plan.

Results

We have seen a constant growth of the HPH activities and culture. Since 2021, the HPH Regional Coordination Center (CC) moved to the regional health coordination company ARCS. This location allows the best leadership. The HPH CC ARCS establishes the periodic meetings of the regional groups, carries out advocacy actions, improvement paths, assesses the progress with the representatives. In 2020 we signed an agreement with the professional orders of physicians and psychologists to train multiprofessional teams of HPH specialist for Health Promotion of the caregivers. In 2021 this innovation it's going to be stabilized.

Conclusions

Thanks to the HPH architecture, set up in 2019, during 2020 we faced the challenge of distress of the professionals during pandemic starting a innovative method in order to promote fast physical and psychological recovery. The 2018 HPH regulation and annual HPH action plans with a chapter dedicated, give us a stronger pattern than in the past.

Comments

The Friuli Venezia Giulia HPH network it's covering a territory of 1,200,000 inhabitants. The regional HPH CC ARCS collaborates with the Istituto Superiore di Sanità to develop strategies about psychophysical wellbeing of the caregivers, with annual workshops.

Contact: AGUZZOLI cristina

Azienda Regionale di Coordinamento per la Salute ARCS-
Regional Company for Coord, Via Vittorio Veneto
33100 Udine, cristina.aguzzoli@arcs.sanita.fvg.it

Development of Nutrition Standards for Health Promoting Hospitals and Health Organizations in Finland

JÄRVI Leea, PÖLÖNEN Auli, SILJAMÄKI-OJANSUU Ulla

Introduction

In Finland, social and health care organizations have no commonly agreed upon standards for nutrition quality management. The Association of Health Promoting Hospitals and Organizations in Finland (STESO) set up a multidisciplinary group of experts in 2019 to develop standards for nutrition health promotion and care. The aim was to determine the management structure and tools for assessing and monitoring nutrition health promotion and care for social and health care organizations. This study presents the results of the development process.

Purpose/Methods

The study is based on the Standards for Health Promoting Hospitals, 2006 (HPH), composed of the dimensions Management policy, Patient assessment, Patient information and intervention, Promoting a healthy workplace, and Continuity and cooperation. In addition, the Guidelines for Nutrition Care in Finland, the Tobacco-Free Hospitals audit model, and the good health care practices of STESO organizations have been taken into account. The group of experts carried out the study in 2019–2021 using workshops and group discussions.

Results

A structure of nutrition standards for social and health care organizations, based on HPH standards, has been developed. This structure consists of five standards with several sub-standards. Targets, measures, responsibilities, and evaluation methods for each sub-standard have been defined. The work is in a pilot phase.

Conclusions

Feedback from representative member organizations and health care professionals suggests that the need for quality management tools for nutrition health promotion and care has been widely recognized. The national health and social services reform contributes to the need for these standards.

Contact: Järvi Leea

Oulu University Hospital
PL 10, 90290 OYS Oulu,
leea.jarvi@ppshp.fi

Incentives for doing health-promoting health care in hospitals and other health care settings: first concept note

LANGELAND IVERSEN Mette, METZLER Birgit, NOWAK Peter

Introduction

Health promoting health care (HPHC) aims to advance health gains and ensure equal access to health promotion for everyone. The World Health Organization (WHO) has an objective to ensure that HPHC services become an integral part of universal health coverage (UHC). Policy and decision makers need to know about incentives to strengthen health promotion within different health care settings. However, creating suitable and effective incentives is a challenge since no incentive model is appropriate for every context. Hence, the objective is to compile an evidence synthesis report on incentives for doing HPHC in hospitals and other health care settings.

Purpose/Methods

With the purpose to serve as a technical background paper for policy makers and health professionals we combine literature review with consultation of experts from various fields (focus groups/workshops). We apply a stepwise approach consisting of three phases with I) literature review, II) expert consultation III) synthesis/reflection.

Results

The study will be carried out sequentially (start end of year 2021, finish early year 2023). Based on the literature review, a list of models of incentives is produced and categorized into financial/non-financial, direct/non-direct. Further, the most promising options for incentivizing health organizations to implement health promotion with examples of good practice are presented.

Conclusions

We anticipate that the results will spark insightful discussions and work as a technical background document for the future work and follow-up activities on HPHC.

Contact: METZLER Birgit

Gesundheit Österreich GmbH – Austrian National Public Health Institute
Stubenring 6, 1010 Vienna,
birgit.metzler@goeg.at

Oral session 4.2: Healthy workplace II

Health Orientated Physical Handling in Nursing Care

TREŠLOVÁ Marie, FILAUSOVÁ Drahomíra, CHLOUBOVÁ Ivana, SVIDENSKÁ Tereza, KIMMEROVÁ Jana

Introduction

Physical handling (PH) everyday nursing intervention has an enormous impact on musculoskeletal system of nursing personnel. It should be the management concern to ensure healthy working conditions for PH performance. The aim was to find how the hospital management ensures working conditions for PH

Purpose/Methods

We used quantitative research, method of questioning, technique of non-standardized questionnaire. Data collection was realized in the period from February to March 2020. The selective sample contained 96 nurses from South Bohemia hospitals. It was a quota selected sample based on age and region. The data analyze was carried out with the use of SASD and SPSS programs. In the framework of the context analyze according to the character traits and number of observation, Pearson Chi-Square and independence tests were applied. The strength of the relationship was measured on 3 levels of significance $\alpha = 0,05, 0,01$ and $0,001$.

Results

Nurses expressed their most often pain of lower back (77.6%) and sacral back (58.8%). They defined the lack of aids for PH (36.8%) and lack of personnel (46.3%) as the reason for the pain. They expressed their disagreement with the statement "I use the PH aids because my management requires it" (84.4%). The PH training they've attended was recommended by the management (52.2%) and it was organized by the management (33.3%). 52.2% nurses attend the trainings irregularly and 40.6% of them don't attend any trainings. More than one year ago 48.9% of nurses attended the training and 34.0% nurses attended it more than two years ago.. These results show unsatisfactory status for nurses' health maintenance.

Conclusions

The results of our sample show the evidence that PH is not organized systematically. Hospital management should focus on PH aids equipment, so as on number of personnel. These are the main recommendations for decrease the physical overload of nursing staff and for the prevention of health injury.

Contact: TRESLOVA Marie

University of South Bohemia in České Budějovice, Faculty of Health and Social Sciences
J. Boreckého 1167/27, 37011 České Budějovice,
treslova@zsf.jcu.cz

Fatigue and pain among nurses caused by physical handling with a patient

FILAUSOVÁ Drahomíra, TREŠLOVÁ Marie, BELEŠOVÁ Romana, CHLOUBOVÁ Ivana, SVIDENSKÁ Tereza, KIMMEROVÁ Jana

Introduction

Physical handling in nursing is an activity involving pushing, pulling, carrying, lifting the patient. It's connected with health risks which must be carried out with organisational policies. It was to recognize subjectively perceived fatigue and pain caused by handling and moving of patients.

Purpose/Methods

Quantitative research, technique of non-standardised questionnaire was carried out. Data collection was realised in the period from February to March 2020. The selective sample counted 96 nurses in South Bohemia. It was a quota selected sample based on age and region. The data analyses was carried out with the use of SASD and SPSS programmes. In the framework of context analyses according to the character traits and number of observation Pearson Chi-Square and Independence tests were applied. The strength of the relationship was measured on 3 levels of significance $\alpha = 0,05, 0,01$ and $0,001$.

Results

The feeling of physical fatigue of nurses after their shift increases with the number of patients which they physically handled during a shift ($p < 0,01$). The relationship between the feeling of physical fatigue after their shift and the feeling of pain in some part of their body after physical handling with a patient was proved ($p < 0,001$). The feeling of physical fatigue of nurses after a shift is higher when there isn't sufficient availability of handling equipment ($p < 0,05$).

Conclusions

To decrease the feeling of fatigue and to reduce nurses' pain, needs to decrease nurses' overload. That is to decrease number of patients or to increase the number of nurses so as the sufficient availability of handling equipment. A repetitive educational course on physical handling for nurses could improve the nurses' problems of their fatigue and pain. The study was limited by a small number of respondents.

Contact: FILAUSOVÁ Drahomíra

University of South Bohemia in České Budějovice, Faculty of Health and Social Sciences
J. Boreckého 1167/27, 37011 České Budějovice,
filausov@zsf.jcu.cz

Effectiveness of workplace health promotion in hospitals and care homes: a systematic review

SCHREYER Julia, WEIGL Matthias, SCHMITT Isabella

Introduction

Healthcare workers in hospitals and nursing homes are at an increased risk of mental and physical health problems, partly caused by the very nature of their work. Workplace Health Promotion (WHP) activities may achieve beneficial effects by changing the work situation or individual behaviours. Yet, there is no systematic review across the variety of WHP interventions in hospitals and care homes. We aimed to establish a comprehensive overview of WHP interventions in hospitals or care homes with the following questions: What interventions have been scientifically evaluated? How effective are these interventions? What success factors for implementation have been reported?

Purpose/Methods

We subdivided our review into nine distinct domains of WHP (e.g., stress, communication, interaction work, leadership culture). For each domain, we screened literature for high-level of evidence studies: in domains with a sufficient literature base, we included systematic reviews of intervention studies in order to conduct an umbrella review; for domains with a lack of systematic reviews, we included randomised-controlled trials, controlled trials and interrupted time series studies. Studies were eligible if they examined the effect of WHP-interventions in hospitals or care homes on biopsychosocial health outcomes of employees or organizational outcomes. We conducted the systematic search on four databases. Screening was performed by two independent reviewers.

Results

Overall, we identified 23,452 records, of which we included 76 systematic reviews and 64 primary research studies. We identified an inconsistent level of evidence across all nine WPH domains with inconclusive evidence concerning effectiveness of WPH interventions. Data extraction is ongoing and is to be finalized soon.

Conclusions

We anticipate that our systematic assessment will identify effective WHP interventions.

Contact: SCHREYER Julia

Ludwig Maximilian University Munich
Ziemssenstraße 1

80336 Munich,

julia.schreyer@med.uni-muenchen.de

Paradoxes and dangers of workplace health management in Hospitals

NOEHAMMER Elisabeth, DREXEL Michaela

Introduction

Health promotion at the workplace (WHP) is an effort designed to cover all areas and bring gains to the organization, society, and the individual. However, the potential gains do not come without costs, side-effects and ambiguity. Dilemmas that may occur when health-related knowledge is transferred into corporate (governance) practice can be differentiated according to their origin: health promotion itself, the organization, the hierarchy, individual aspects, and the program. All these have general and health sector related aspects.

Purpose/Methods

Based mainly on own research and complemented with results of other studies, we will focus on the dilemmas most likely in healthcare organizations. On the organizational level, we concentrate on how to ensure management support. Regarding hierarchies, we show how to integrate executives and the workforce in the process. On the individual level, we highlight how to integrate high professional knowledge and close blind spots regarding self-care. Program design dilemmas are related to routines and organizational citizenship behaviour.

Results

There are more barriers and dilemmas encountered regarding WHP in hospitals than in other organizations. This is due to the focus on health as organizational topic, the professional culture, and the structure and processes plus specific blind spots on all levels. Ignoring these likely leads to WHP program failure, but careful, resource-efficient, participative, stepwise, data-based and evidence-based interventions fitting into the corporate culture and opening an organizational discourse for employee health can be very successful.

Conclusions

Though a total effect appraisal for WHP is missing, the potential results especially in the healthcare sector are very positive. However, a choice is required for dealing with each dilemma in the context of WHP. The degree of freedom varies, and the dilemmas often interrelated. The best solution of the current multi-staged prisoner's dilemma for organizations would be increased transparency and cooperation.

Contact: NOEHAMMER Elisabeth

UMIT, Eduard-Wallnoefer-Zentrum
6060 Hall in Tirol,

elisabeth.noehammer@umit.at

Oral session 4.3: Monitoring, implementation and evaluation

Use of a SWOT risk analysis to optimize the process of drug administration by nurses

PROKEŠOVÁ Radka, BRABCOVÁ Iva, TÓTHOVÁ Valérie, FILKA Jozef, KUBEŠOVÁ Hana

Introduction

One of the tools a hospital can use to reduce or eliminate the risks associated with drug administration is to conduct a SWOT analysis to examine the process. This paper aims to analyze, using a SWOT risk analysis, the process of drug administration used by nurses in selected hospital wards. Data is based on the project called "Safety of drug administration, by nurses, in selected inpatient hospital wards" (reg.N. NU20-09-00257), supported by the Ministry of Health of the Czech Republic.

Purpose/Methods

The qualitative part of the research consisted of a SWOT risk analysis of the drug administration process used by nurses at the České Budějovice Hospital. The research was carried out by a team that included representatives of the hospital management as well as nurse managers from the selected inpatient wards (surgery, internal ward, follow-up care ward).

Results

The focus of the analysis was the drug administration process used by nurses. To assess this process, a SWOT risk analysis was conducted in selected hospital wards to identify the risk areas associated with the drug administration. The analysis identified several significant risks, including lack of auxiliary personnel, risks associated with a possible blackout or pandemic, and risks associated with a failure of drug or generic drug substitution; other less significant risks were also found.

Conclusions

The results of this study show that a SWOT risk analysis can be used to find weaknesses affecting the quality of patient care and can be used as a basis for recommendations to management to reduce risks while at the same time improving the quality of the process. In our study, the recommendations consisted of addressing the number of auxiliary staff and preparing procedures for emergencies (e.g., blackouts, pandemics) while taking into consideration the other risks identified.

Contact: PROKEŠOVÁ Radka

University of South Bohemia in České Budějovice, Faculty of Health and Social Sciences

J. Boreckého 1167/27, 37011 České Budějovice,

rprokes@zsf.jcu.cz

An Evaluation and Monitoring Scheme for Gender Sensitivity: A Proposal for Healthcare Settings

GELISANGA Maribeth Anne, PAGKATIPUNAN Paulo Maria, VILLANUEVA Natividad

Introduction

Collecting gender sensitivity data will help the administrators understand the magnitude of gender barriers, and guarantee accountability towards inclusive and evidence-based interventions using public resources. The information gathered will identify health policies and programs to warrant better gender equity within the healthcare system. Objectives 1. Propose a management system on evaluation and monitoring of gender and development processes to optimize health gains for stakeholders 2. Present a governance model for gender and development in healthcare settings 3. Determine the gender sensitivity of a healthcare facility

Purpose/Methods

A cross-sectional research design was utilized. The questionnaire was validated for a healthcare facility, contextualized for and piloted in a developing country by gender champions. The data was further interpreted using the World Health Organization's Gender Responsive Assessment Scale (WHO-GRAS) for a succinct description of the gender sensitivity of a health institution.

Results

Forty-four units of the tertiary teaching hospital were assessed. The facility scored 68.78% overall. Data revealed that the facility has (1) gender-sensitive policies; (2) the capacity to deliver healthcare services to all with one male or female service provider; and (3) provide gender-related training. However, there were no correlations between gender-related trainings and gender sensitivity scores. Further, the structural characteristics were challenged by limited private rooms for client interaction and hygiene activities. Moreover, sex-disaggregated data were inconsistently collected.

Conclusions

The facility rated gender-sensitive in WHO-GRAS. It prudently considers gender norms, roles and relations, but does not address inequality. It indicates gender awareness, although often no remedial action is developed. The authors recommend the use of the tool for practical and concise assessment, and easily interpretable evaluation of gender sensitivity of a healthcare facility.

Contact: GELISANGA Maribeth Anne

University of the Philippines - Philippine General Hospital
Taft Avenue, 1000 Manila,

mpgelisanga@up.edu.ph

Highlighting professional judgement in evaluation of public health work

MAGNUSSON Maria

Introduction

Health promotion interventions on community level include complex processes and should be evaluated with correspondent tools. Professional judgment - drawing on reflection on strategies, inclusiveness and implications for planning - contains valuable information for policy-makers and other stakeholders. Systematic documentation and sharing of knowledge optimizes development of methods.

Purpose/Methods

The public health unit of a community hospital in Sweden is developing a digitalized methodology for formative and summative evaluation of public health work; Health Equilibrium Initiative. Tailored to promote health equity it draws on Social Cognitive Theory, norm-critical reflection and influence for those concerned. Quantitative measures are included. Reflections and implications for future work are discussed in the team.

Results

2020 was dominated by the pandemic. The team conducted 42 meetings with the public, mostly digital or outdoors. (n for 2019: 75). Most of them were dialogues about corona-virus (themes contagion, Swedish strategy, immunization) or tobacco, preschool-dietician and biking school for adults. Obstacles for participation were the digital form and language problems. The team identified implications for future work, ie: Talk about "common female experience" may function as exclusionary. During the pandemic parents of newborns have lost opportunities for support due to cancelled open-preschool activities. The digital format is problematic for some people (poverty, crowded living, difficult to "speak out") but has opened new possibilities for others to discuss health related issues. Some partnerships have been strengthened and new ones have been formed.

Conclusions

Evaluation based on reflection, shared values and trust enhances professional judgment and enables systematic development of tools for public health work.

Contact: MAGNUSSON Maria

SV Hospital Group/Västra Götaland Region
Halmtoget 1, 424 65 Angered,
maria.b.magnusson@vgregion.se

The use of NHI-PharmaCloud in monitoring the medication of psychiatric patients and improve patient safety of combined medication in a Regional Hospital in North

LI Ling-May, LIN Ching-Feng, LUO Jiing-Chyuan

Introduction

Since the modern medical care is usually no longer provided by physicians alone for diagnosis and treatment, and different medical professionals form an interprofessional care team to take care of patients, the roles and professional capabilities of each profession in the team are important. In order to improve the coordination and communication between the professions and provides "patient-centered" team care.

Purpose/Methods

This study targeted 159 patients in a psychiatric day ward in a regional teaching hospital in the north from February 2018 to June 2019. The pharmacists completed quarterly medication safety assessments for all patients in the psychiatric day ward. The pharmacist will perform a descriptive statistical analysis of the evaluation records to understand and analyze the monitoring of the quality of medications for mental patients.

Results

After research and analysis, the focus is on the following key patients, including ICD-10 is F20~F25 series, patients with schizophrenia or schizoaffective disorder, and comorbidities of metabolic diseases. The pharmacists suggested a total of 263 questions related to medication, with the most drug interactions, a total of 90 (34.2%). Physicians responded with 156 (77.6%). The results of the questionnaire showed that the results of various satisfaction surveys were very satisfied and satisfied, with an average of 96.5%.

Conclusions

In February 2018, the hospital launched a clinical interprofessional cooperative care mode for the psychiatric day care unit. The physician appropriately adjusted the medicine and its dosage to reduce the incidence of comorbidities. The pharmacist provides appropriate drug information and clinical pharmacy services. The nurse provides a bridge between the patient and the medical team, encourages patients to participate in the entire treatment plan, and strives to cooperate to implement the best treatment.

Contact: LIN Ching-feng

Keelung Hospital Ministry of Health and Welfare
Shin-Erh Road 268, 201 Keelung,
chingfeng01@gmail.com

The effectiveness of Using Hydrofiber for Skin Graft Fixation

YEN Yahui, LEE Ru-Ping, HSU Honda Hsu

Introduction

The traditional method of skin graft fixation is with tie-over bolus dressing. The use of splints in the extremities for skin graft fixation is a common practice. But these splints are heavy, uncomfortable and contribute considerably to our overall medical waste. Hydrofiber has a strong fluid absorption property, and fixates well to the underlying wound once applied. In this study we used hydrofiber for fixation, avoiding the use of splints after skin grafting.

Purpose/Methods

All patients that had undergone skin graft fixation using adhesive hydrofiber foam, since March 2017 to March 2019, were included in the study. If skin graft fixation was performed with any other method they were excluded from the study. A total of 40 patients were included. Their ages ranged from 19 to 87 years old. Demographic data and medical history was obtained by retrospective chart review. Data that was collected included: age, sex, comorbid illnesses, defect location, defect size, operative time, percentage take of skin graft, and length of hospital admission.

Results

There were 34 men and 6 women with a mean age of 61 ± 18 years. The defect size ranged from 1×1 cm for fingertips to 30×12 cm for lower limb defects. The average defect size was 61 ± 78 cm². The mean skin graft take was $96\% \pm 6\%$. Because splints were not required, decreasing the medical waste created as well as maximizing patient comfort. Meanwhile we saved around 48 kg of medical waste over the space of 1 year.

Conclusions

The use of hydrofiber for skin graft fixation was effective and technically very simple. Splints were not required with this method, decreasing the medical waste created and increasing patient comfort. We suggest that this is an excellent alternative for skin graft fixation while at the same time decreasing our carbon footprint as surgeons.

Contact: YEN Ya-Hui

Buddhist Tzu Chi general hospital
3F-6, no 136, Taihe E. St. Beitun Dist.
406 Taichung, ennieyen@hotmail.com

Oral session 4.4: Health literate health care organizations

Building the E-health campus to strengthen health literacy and increase hospital brand image in Kaohsiung

CHUNG Yong-Chuan, LIN Li-Lung, HUANG Min-Hsin, KO Yi-Tsen

Introduction

According to statistics from government database, the proportion of junior high school students being overweight was 29.2%; people aged 20 years or above with hypertension and diabetes accounted for 25.6%. These statistics indicate that the population with chronic diseases is becoming younger. In addition, the COVID-19 pandemic changed citizens' lifestyles. Our hospital cooperated with nearby schools and the foundation to create e-health campuses. We hope that technology can be used to educate students' health knowledge, health self-management concepts, and increase hospital brand image.

Purpose/Methods

Our hospital developed three stages of plans to raise students' personal health care and management and induce behavioral changes as follow: 1.Stage 1-create: Our hospital cooperated with technology manufacturers to develop app and installed a biomeasurement device inside a convenience store near school as the test venue. 2.Stage 2-introduction: Our hospital designed tasks involving a total of 21 health themes. In addition, health score rewards were designed to encourage students' participation. 3.Stage 3-change: Biomeasurement and scoring activities were set as regular courses of the schools.

Results

1.From January 2019 to January 2020, a total of 1038 students participated in the measurement activities and accumulated 120,115 points. 2.The plan won the Symbol of National Quality certification as "Child and Teenager Health Development Campus Establishment Plan" and the silver award as a hospital social responsibility sustainable project. In addition, the plan was published in a poster of the Kaohsiung Municipal Hospitals Joint Conference. 3.A total of 13 media reports that covered the above were released.

Conclusions

Our hospital adopted the three-stage plans sequentially and changed students in cooperative schools. Only through continuous education can diseases be controlled effectively. The proposed method will be incorporated into curriculum guidelines and promoted to other schools in Kaohsiung to strengthen students' health self-management concepts and enhance our hospital brand image.

Contact: CHUNG Yong-Chuan

Kaohsiung Municipal Siaogang Hospital; National Sun Yat-sen University
13F., No. 25, Gangping Rd., Xiaogang Dist., Kaohsiung City
812005, Taiwan (R.O.C.), Kaohsiung,
terrychung0623@gmail.com

The No Straw Campaign with Health Literacy Approaches in Healthcare Setting

SIE Ning-Huei, HOU Chun-Yen, CHENG Yu-Yang, LIN Ming-Nan

Introduction

In Taiwan, one estimate suggested 8 million straws are used every single day and 8.3 billion plastic straws polluted the beaches globally. To decrease in straw consumption and reduce the plastic waste, Taiwan's ban on the use of single-use plastic straws goes into effect on July 2019 and the restriction apply to government departments, schools, shopping malls, and fast food chains except for healthcare institutions.

Purpose/Methods

The No Straw Campaign in hospital is a mission to against single-use plastic since March, 2019 ahead government ban. Firstly, under hospital leadership's support, we set the policy and timeline for ban on plastic straw use, and persuaded all the outsourcers include café, convenience stores, shops not to provide plastic straw and provided the alternative solutions. Secondly, through the poster, video, scavenger hunt, social media (press release, YouTube, Facebook, Daai TV) and announcement which was designed with health literacy principles to help the patients and visitors are easy to access, understand appraise, and apply the information and corresponsive strategy of health impact and climate change. Lastly, we encourage the subjects could think and practice green behaviors in their daily life even to have influences on their families.

Results

During the two years, we found that the No Straw Campaign in hospital could decrease 2/3 plastic single-use straw and didn't give rise to complaints from the outsourcers and patients. On the contrary, most of them gave positive feedback and agreed with our environmental friendly ideas. Furthermore, the public could gain the health literacy in climate change and practiced environmental protection behaviors in their daily life.

Conclusions

The climate change is a leading public health issue currently and healthcare service system should not only do no harm to the earth but also have to heal the health of the planet. Next step is to phase out all disposable plastics and achieve net zero emissions by 2050.

Contact: SIE Ning-Huei

Dalin Tzu Chi Hospital, Buddhist Tzu Chi Medical Foundation
No. 2, Rd. Mingsheng, 62247 Dalin Town, Chiayi County,
eagle0531@gmail.com

Promoting health literate primary care units through certification – a pilot study from Austria

GUGGLBERGER Lisa, ROJATZ Daniela, KOSLITSCH-NAGELER Verena

Introduction

While hospitals have a long history of setting-based health promotion this approach is new for primary care in Austria. With the new primary care concept, health promotion and health literacy (HL) are now defined as tasks for primary care units (PCUs). The concept of health literate organizations is an important driver for the development of health promoting PCUs. As an incentive to implement organisational HL in PCUs, the certification "health literate PCU" was developed.

Purpose/Methods

The pilot study aims to answer several research questions: What are suitable requirements for the different certification levels (concerning self-assessment, communication trainings for staff and distribution of health information)? What is the motivation for PCUs to participate in the certification process? What are the requirements for a roll-out? Five PCUs have applied to take part in the pilot and will be interviewed at least twice during the process. Additionally, interviews with PCUs that are not participating will be carried out.

Results

The developed certification consists of three levels, is based on a self-assessment tool and is valid for three years. Preliminary results of the pilot study will be presented at the conference. We expect to learn about the understanding of HL in PCUs, motivation of PCUs to become a health literate organisation and hindering and supporting factors for the implementation of HL.

Conclusions

As this is an ongoing pilot study there are no conclusions/lessons learned yet. Based on the results from this pilot study next steps could be the development of a nation-wide roll-out of the certificate and an adaptation for hospitals.

Contact: GUGGLBERGER Lisa

Gesundheit Österreich GmbH
lisa.gugglberger@goeg.at

Self-Assessment Tool to Promote Organizational Health Literacy in Primary Care Settings in Switzerland

DE GANI Saskia Maria, JAKS Rebecca, STÜRMER Natascha, NICCA Dunja

Introduction

Health literacy (HL) is a fundamental health determinant. It can be improved effectively by strengthening individual HL and reducing demands and complexities of the health system. On the system level, health care organizations play an important role in improving population's HL by empowering patients, taking an

active role, and promoting their health. So far, few efforts have been taken to promote organizational HL, especially in German-speaking countries.

Purpose/Methods

This project aimed at developing a self-assessment tool called "Organizational Health Literacy Self-Assessment-Tool for Primary Care" (OHL Self-AsseT) to enable primary care organizations to assess and improve their organizational HL. The tool was developed based on literature and in close participation with experts, general practitioners, and community care organizations in Switzerland. Thereafter it was piloted in 4 general practices and 6 community care teams using qualitative and quantitative methods. The final tool consists of three modules: (1) a manual with detailed introduction and instruction, (2) a checklist for self-assessment of organizational HL and (3) a handbook with measures for improvement. The OHL Self-AsseT includes a team-process to identify action points, plan and implement improvement measures.

Results

The participative development process indicated high acceptance of the OHL Self-AsseT. Preliminary quantitative data show high fidelity and acceptance of the tool, whereas qualitative data provide insights into the interplay of leadership with the implementation of the OHL Self-AsseT.

Conclusions

With the focus on a scale up of the OHL Self-AsseT in Swiss primary care settings, the evaluation results serve to refine the OHL Self-AsseT and to plan scale-up strategies.

Contact: DE GANI Saskia Maria

Careum Stiftung
Pestalozzistrasse 3, 8032 Zürich,
saskia.degani@careum.ch

Oral session 5.1: Enhancing people-centered health care and user involvement

The “Patient Engagement”: An Italian project of healthy lifestyles promotion in the public hospitals members of the Friuli Venezia Giulia (FVG) HPH regional network

DE MONTE Ariella, BROSOLO Piero, CECCHI Adriana, CONTE Alessandro, FEDELE Roberta, GANDOLFI Chiara, LA DIEGA Amedeo, LARDIERI Gerardina, NAGLIATI Carlo, OSTARDO Edoardo, PORTOLAN Patrizia, RUSSIAN Stefano, SCARPIS Enrico, AGUZZOLI Cristina

Introduction

The FVG region has joined the international HPH network since 2003 and has developed training courses for the well-being of healthcare professionals and patients and includes 1 regional healthcare coordination company (ARCS), 3 public healthcare companies, 2 research institutes and 1 private hospital. Hospitals need interdisciplinary teamwork, shared decision-making process, involving patients and families during treatment for self-management support through an evidence-based health promotion process. However, limited studies were carried out on its use in the public sector.

Purpose/Methods

In 2020 the regional monothematic HPH working group “Patient Engagement” was set up. As a first step the group assessed the psychophysical and social health needs assessment expressed as disease and as health promoting factors, related interventions conducted that are documented in the medical record used during hospitalization in all the hospitals consistently with HPH validated documentation model (HPH-DATA Model and HPH Doc-Act) and related self-assessment.

Results

Medical records turned out disease risk oriented, while psychological and social health promotion data were lacking. Based on these results the group proposed a format to assess the health promotion needs to be included in the health documentation and to develop a feasibility study to set up Multiprofessional Teams for the promotion of patient health in hospitals.

Conclusions

It is necessary to introduce assistance models oriented towards psychological health promotion to improve health quality of long-term care also in relation to the pandemic effects.

Contact: DE MONTE Ariella

Regional health coordination company and regional coordination of HPH of Friuli, Via Pozzuolo, 330

33100 Udine, ariella.demonte@arcs.sanita.fvg.it

A European standard for patient involvement and free digital tools for implementing person-centred care

WOLF Axel

Introduction

Person-centred care (PCC) is rapidly becoming seen as the future of healthcare, as it creates a win-win-win situation for patients, healthcare staff and society. But tools are needed to enable the implementation of PCC.

Purpose/Methods

The University of Gothenburg Centre for Person-centred Care GPCC has performed research since 2010. In 2016 GPCC initiated several initiatives to support the implementation and facilitation of PCC; a European standardisation process, to facilitate the implementation of, work with, and research on PCC, and GPCC also started developing free digital tools to aid the implementation of and work with PCC. The PCC Game App was developed together with the Swedish branch of HPH, and the free online facilitation tool mutualmeetings.org.

Results

The European standard, entitled Patient involvement in healthcare - Minimum requirements for person-centred care, was adopted in June 2020, and it is the first in Europe in its field. It can be used in several different ways by health and care actors, patient organisations, researchers, businesses and other actors. Our free digital tools, the PCC Game App and Mutual Meetings, an online education package are now globally available in English, for free. They have been downloaded thousands of times. <https://www.gu.se/en/gpcc/about-our-education>

Conclusions

As research shows the efficiency of PCC, the need for successful implementation of PCC is urgent. Leading a consensus-driven standardisation process takes time, but the result is a European standard, which can be of real practical use by many health care actors. Also, creating digital tools that can be downloaded for free to any smartphone or tablet and a free online education package could be efficient ways to spread evidence-based knowledge, enabling individuals and groups of healthcare workers to practice PCC together.

Comments

The University of Gothenburg Centre for Person-centred Care GPCC (est 2010) investigates person-centred care, rehabilitation and care in various medical conditions, as well as the organisation of person-centred care and issues regarding implementation and education. At GPCC more than 100 researchers gather from various fields and countries to collaborate in some thirty on-going different research projects and groups. www.gu.se/gpcc

Contact: TENGGREN DURKAN Jeanette

University of Gothenburg
SA, Inst. Vårdv. & hälsa, Arvid Wallgrens Backe
40530 Gothenburg,
jeanette.tenggren.durkan@gu.se

Verification understanding - TEACH BACK model

FILHABER Aliza, BIBI Irit, BEN ION Ilana, KALMANOVICH Dorit, KRUSHINSKY Zoharit

Introduction

The core of nursing is in the patient's guidance during treatment in order to improve health outcomes, reduce re-hospitalizations, reduce health costs and improve patient and family satisfaction. In providing information to the patient according to the Teach Back model - which is a method of verifying patient understanding, through it the therapists can gauge the effectiveness of the training and understanding the explanations. The principle of the method is that the therapist explains to the patient, rather than the patient's understanding by asking him to explain what is said back in his words, it is a dialogue. This method closes the communication gap between the therapist and the patient while improving the patient's knowledge. Nurses play an important role in assessing the patient's training needs and in providing information to the patient. Aim of the study: Measure nurses' attitudes on the Teach Back model before and after intervention.

Purpose/Methods

Methods: A prospective study conducted through a survey and included nurses from the Surgical Division Research tool: Attitude questionnaire referring to two time points, before and after the workshop (intervention) that included model learning and practice.

Results

Results: 64 respondents to the questionnaire before and 31 after the intervention. 87% women, 45% with up to 5 years of professional experience. The nurses largely understand that verifying the patient's understanding is their responsibility (42% did not think so moderately or more before the intervention and only 23% after the intervention). Nurses after the intervention think that the responsibility to indicate a misunderstanding lies with the patient (42% moderately or more compared to 66% before) and that in the existing workload it is not possible to verify understanding with each patient (53% moderate or more compared to 77% before). 90% indicated the importance of ensuring understanding throughout the hospitalization cycle.

Conclusions

Conclusions: To develop the patient's level of health literacy it is important for caregivers to make sure the patient understands the information told to him based on the Teach Back model. Intervention on the subject and understanding has a very positive impact on treatment and various health outcomes.

Contact: FILHABER aliza
KAPLAN MEDICAL CENTER
BOX#1, 76100 REHOVOT,
alizafilhaber@gmail.com

The Implement of Spiritual Concern in the Concept of Holistic Care.

STAWASZ Mariola, JHAUNG Yi-Ling, HONG Yi Jia

Introduction

Fu Jen Catholic Hospital (hereafter: FJCH) was established in 2017. It is the eleven's Catholic hospital in Taiwan and the youngest one with 600 beds and 1500 employees. FJCH has the Pastoral Care Department (hereafter: PCD) as a Catholic healthcare institution characteristic of every other Catholic hospital. Pastoral care workers in its service take the holistic care concept to provide high-quality patient care with paying attention to the physical, emotional, social, economic, and spiritual needs of the person, their response to illness.

Purpose/Methods

During the year June 2020-April 2021, twice the surveys were done: first, the number of 100 questionnaires about the "Quality of Holistic Care" and 88 surveys were returned, which amount to a valid response rate of 88%. The questionnaire involved questions about patients accepting the current health conditions, the importance of their relationships with others. Second, from the questionnaire, we summarized and analyzed the main reasons for the inability to improve whole-person care. Then the second survey with the number 52 questionnaires' about the "Patience Spiritual Needs" was distributed for the same patient to perform the pre-test and the backside test. Several 47 surveys were returned, which is the rate of 90.4%.

Results

The outcome of the first survey shows that in the "Quality of Holistic Care": first, the patients' wants to know their current health status (92%), the second to experience that their life in their sickness is valuable and meaningful (82%) and third, that the medical staff will more professionally. The second survey indicated spiritual care, and the score improved from 65 points in the previous test to 83.7 points.

Conclusions

This study was undertaken to explore perspectives about spiritual care as an essential aspect in caring for patients. As patients deal with stress, loss, suffering, challenges, the person may attempt to find meaning and purpose for their illness. The time surrounding hospitalization may result in spiritual strengthening or total loss of hope and faith. It is also crucial to educate nurses about this aspect of care that they can absorb to recognize those needs and learn to respond during this time is of vital value.

Contact: STAWASZ Mariola

Fu Jen Catholic University Hospital, Pastoral Care Department
New Taipei, Tajshan, Glejczy Rd., 69.
24308 Tapei, mariolka2007@gmail.com

Promoting Health through Humour

ROESSLER Maggie, SEEBACHER Simone

Introduction

Humour has been shown to strengthen interpersonal bonds and increase positive emotions. It is thus a valuable tool for hospital staff to support their patients' wellbeing, while also facilitating communication and helping them cope with work-related stress.

Purpose/Methods

RED NOSES International is a healthcare clowning organisation operating in 11 countries. In RED NOSES Humour in Healthcare Seminars, medical staff and students learn how to integrate humour into their work. From 2020 - 2021, RED NOSES humour specialists trained over 500 medical staff and students across Europe and the Middle East. An evaluation was conducted of Humour in Healthcare Seminars given to a total of 92 nursing students in two Austrian clinics in 2020. Each seminar lasted around four hours and was led by trained healthcare clowns applying interactive training methodology. The students filled out a feedback survey after each seminar, with 13 open and closed questions.

Results

From all completed surveys (N=92), 77/89 claimed that humour interventions were feasible to implement in their daily work, and 58/90 had concrete ideas about how to do so, such as through music, games or jokes. In open responses, over half the students (57/92) noted immediate positive outcomes for themselves such as improved mood (23/57), relaxation (15/57), and fun (14/57). A large majority (76/86) indicated that they would be likely or very likely to recommend the seminar to others.

Conclusions

Humour workshops are a pleasurable and memorable experience for most nursing students which they would also recommend to other healthcare professionals. Nursing students are generally receptive to the idea of using humour at work.

Contact: ROESSLER Maggie
RED NOSES International
Wattgasse 48, 1170 Vienna,
maggie.roessler@rednoses.at

Oral session 5.2: Health workforce practice and training

To create a healthy dining environment to staff and patients in hospital food court

Ji Chuchu, CHEONG Magdalin

Introduction

Recent studies have shown that dining out in Singapore tends to be an unhealthy practice as most hawker/food court food favorites are excessive in fat, saturated fat, cholesterol, and salt. Health First is a program designed to educate the staff of each food stall vendor at the food court of Changi General Hospital

(CGH), Singapore on how to improve their knowledge of healthy food choices/cooking methods and the role of a nutritious diet in a healthy lifestyle.

Purpose/Methods

Before each session, a pre-survey was collected, followed by nutrition education segments conducted by a dietitian and cooking demonstration by CGH Chef. Post-survey was collected after each session. An audit was conducted at 3 monthly intervals for a year after the program to check if the food stalls have made any changes and adopted healthier cooking methods. Follow-up surveys were collected at 6th and 12th months' refresher course to evaluate any improvement in healthy cooking principles. All statistical analysis was performed using SPSS 20.0.

Results

Overall, 20 staff from the stalls were invited to attend this one and half days' interactive program. 90% (n=20) participants had a significant increase in knowledge of a balanced diet and healthy cooking principles after attending program. Audit results indicated that 21% (n=14) of stalls reduced deep-fried food options and 79% (n=14) increased high fiber food choices. 57% (n=14) of stalls also replaced unhealthy food choices/cooking methods with healthier versions.

Conclusions

Our findings indicate that this program is effective, as it provides practical knowledge, awareness and implementation for hospital food court staff on healthy cooking methods/ingredients. Thus, this creates a healthy workplace, support staff, visitors and patients' eating behavior and healthy lifestyle changes.

Contact: JI CHUCHU
Changi General Hospital
2 Simei Street 3, Singapore ,
chuchu_ji@cgh.com.sg

Design and validation of the „Nurses' Role in Health Promotion Questionnaire“

IRIARTE-ROTETA Andrea, PUMAR-MENDEZ Maria Jesus, LOPEZ-DICASTILLO Olga, MUJICA Agurtzane, HERNANTES Naia, ANTOÑANZAS Elena

Introduction

Health promotion role seems not to be always clear for nurses. Consensus about nurses' expectations is necessary to implement their functions. However, there are not instruments to evaluate nurses' expectations, to determine which (if any) are held in consensus. Gaining insight about nurses' expectations can help to design interventions to fully develop primary care nurses' health promoting role. The aim of this study is to design and validate an instrument that measures primary care nurses' agreement on their role in health promotion.

Purpose/Methods

A questionnaire for the measurement of nurses' agreement on their health promoting role was designed, based on a taxonomy of activities in health promotion and prevention for primary care.

This taxonomy represents a catalogue of 43 activities that should be carried out by frontline health professionals to fully develop health promotion and prevention in primary care and is based on the Ottawa Charter. The questionnaire was validated using an expert panel that evaluated the relevance of each item, five cognitive interviews and a pilot test. Questionnaire's comprehensibility, content validity and interviewer burden, as well as the reliability of the scale were assessed.

Results

Experts agreed that all dimensions of nurses' role in health promotion were represented and the interviewees found the questionnaire easy to understand. The final questionnaire comprises 47 items covering 8 dimensions that capture each of nurses' functions in health promotion: planification, situational analysis, capacity building, development of awareness/public opinion, advocacy, development of networks, development of partnerships and intervention strategies, that reveal health promotion as a process. The Cronbach's alpha of the scale was calculated, which was 0.97.

Conclusions

The questionnaire ("Nurses' Role in Health Promotion Questionnaire") seems to be a valid and reliable instrument to assess nurses' agreement on their role in health promotion. Further information about the questionnaire's psychometric properties should be obtained by applying it to a larger population.

Contact: IRIARTE ANDREA

Universidad Pública de Navarra
Avda Barañain sn, 31008 Pamplona,
andrea.iriarte@unavarra.es

Health Promotion Practicum for Preparing a Professional HP Workforce

LEVIN-ZAMIR Diane, BRONNER Karen

Introduction

Best Practice in hospital health promotion requires both academic and practical training. Health Promotion (HP) university majors, often focus on health promotion theory and practice however without practical field experience.

Purpose/Methods

A practicum unit has been incorporated into a Masters of Public Health/Health Promotion major at the University of Haifa School of Public Health in Israel. After a semester on HP planning and implementation, students are divided into groups for a 40 hour field placement in organizations with an active full-time academically trained health promoter. Supervision of students in the Assuta Dept. of Health Promotion has been an active placement since 2018. Students become familiar with the HPH model, the organization, its health promotion initiatives and are involved in a practical project: performing a needs assessment, collecting data, developing a feasibility study or evaluating an existing program based on evidence based practice. Each student periodically submits a journal for reflection/feedback. Each group gives a final presentation and submits an academic project report.

Results

The practicum groups have focused on: 2018- physical activity among cancer patients; 2019-developing a plan for healthy and sustainable commuting habits; 2020-preventing the effects of sedentary conditions among hospital staff; 2021-a comprehensive plan for employee health promotion. Due to the COVID-19 lockdowns, the groups in 2020 & 2021 conducted the course tasks digitally. Assuta has adopted students' insights, findings and suggestions.

Conclusions

The Health Promotion Practicum is a significant component of health promotion academic training, offering the opportunity to apply skills, gain a deeper understanding of the academic material and practice theories in real-life setting and scenarios. As in other health science professions, practical experience is vital for preparation for professional fieldwork. According to Israel Ministry of Health directive, graduates of the HP program are entitled to candidacy to HP positions, partly due to addition of the Health Promotion Practicum to the teaching curriculum.

Contact: LEVIN-ZAMIR Diane

Clalit Health Services - Haifa University
101 Arlozorov
Tel Aviv, dianaps@clalit.co.il

Health prevention practices and their needs among health care workers. Rouen University Hospital, Rouen, France

LADNER Joel

Introduction

Health care workers (HCWs) are considered to be a key group in health promotion in health promoting hospital (HPH). HCWs play an important role in increasing awareness among patients regarding lifestyle changes due to the fact that they have the necessary education and health promotion. The aim was to assess health promotion activities in routine care (before implementation of HPH policy) and to identify needs and skills to reinforce education interventions in HCWs in an HPH in France.

Purpose/Methods

A cross-sectional study was conducted in Rouen University Hospital in 2019. An anonymous online questionnaire collected information on sex, age, job, prevention actions delivered in routine care, needs of training and difficulties to develop interventions of health promotion. 700 HCWs were randomized to participate.

Results

A total of 317 HCWs were included, with a mean age of 40.3 (SD=10.4); 35.6% were nurses, 31.4% assistant nurses. In mean, 1.4 actions (SD=0.5) of prevention were conducted per week by HCW. The most frequently prevention topics delivered were nutrition (2.5/5), oral hygiene (1.9) and physical activities (1.4); the less frequently were IST (0.01), contraception (0.12) and drugs (0.12). The most reported needs of training were for cancer screening (36.5%), screen addiction (32.4%) and management of stress (26.6%). In the context to reinforce prevention actions, the most frequent difficulties were

insufficient dedicated time for prevention actions (48.9%) and lack of training (38.9%).

Conclusions

Our findings emphasize the need for effective support and resourcing of the practical implementation of health promotion and prevention in an university hospital. One of the challenging tasks will be to reinforce routine prevention activities in usual care by experimentation new approaches and to implement strategies of training, especially for emerging topics (i.e. screen, sexuality, sleep disorders etc.).

Contact: LADNER Joel

Rouen University Hospital
DEPS HCN CHU Rouen France
76000 Rouen, joel.ladner@univ-rouen.fr

Oral session 5.3: Health promotion responses to the COVID-19 pandemic II

The long-term effect of Covid-19 infection in ICU survivors. A research in a northern Italy region

SANNA Andrea, MIORI Sara, MAGNONI Sandra, UMBRELLO Michele, LASSOLA Sergio, PERINO Annamaria

Introduction

ICU hospitalization is often associated with significant changes in patients' quality of life but the long-term effect of COVID-19 infection in ICU survivors is completely unknown. This study aims to assess long-lasting physical and psychological symptoms impairing normal daily activities, identify risk factors for long-term health consequences, recognize changes in relational, work and economic skills and quantify any unrecognized need for health to study adequate responses of the national health service.

Purpose/Methods

We screened all Covid-19 ICU survivors admitted to two distinct hospitals in the Northern Italy region of Trentino between March and April 2020. Patients were contacted through an informative phone call and asked for oral or email consent to participate to the study. An ICU physician administered a set of three questionnaires including EQ-5D, SF-36 Version 2 and a novel question set designed to determine changes in family, socio-economic stability and care requirements.

Results

The median age of the patients was 65 years; the great majority were men (85%), married (75.9%), retired (54%) and were living in small towns (with less than 15.000 inhabitants). The most frequent comorbid state was hypertension (37.9%), followed by asthma and/or COPD (12.7%), diabetes (8.8%) and ischemic heart disease (7.6%). Due to the acute respiratory failure almost all patients required invasive mechanical ventilation (87%). The

median ICU and hospital length of stay were 20 and 40 days respectively.

Conclusions

A significant proportion of patients requiring ICU care for COVID-19 have health-related problems at 6 months or longer after being discharged. The most affected life dimensions were pain, mobility and usual activities. The risk of developing health-related problems raised significantly among aged people, people with previous comorbidities and with prolonged hospital and ICU stay. We were able to demonstrate a significant worsening of patients' social competences and job skills, with a huge care burden mainly on family members, especially women.

Contact: SANNA Andrea

Azienda Provinciale per i Servizi Sanitari di Trento, Ospedale Santa Chiara, Ser, Via Alcide Degasperis 79
38123 Trento, andrea.sanna83@gmail.com

A secular ceremony during the Covid-19 pandemic. A.O. Ordine Mauriziano, Torino, 02/07/2020

TRENTALANGE Anna Giovanna , FIUMANÒ Pino, MITOLA Barbara, COSTAMAGNA Graziella, AZZOLINA Maria Carmen, DALL'ACQUA Maurizio Gaspare

Introduction

The Covid-19 Pandemic has exposed health care workers, patients and relatives to the fragility of the disease and death. Living in the situation of not being able to say goodbye to their loved ones, through funerals rites, has been devastating. Remember and honour the deceased during the Covid period and the following one. Encourage an empathetic movement of connection between the huge sufferings of both health care workers and hospitalized people, with those of people who would like to share it, but can't do it. Build a sense of belonging to a community who takes care of itself.

Purpose/Methods

Actively involving health care workers, patients and caregivers following the method used by the Social and Community Theatre, based on the effectiveness of theatre and the performing arts encouraging health and wellbeing. Plant an olive tree together (dramaturgical approach). Share the stories of carers, treated people and relatives (auto-biographical approach of medical humanities). A project of the A.O. by "Salutearte" team (www.salutearte.it).

Results

250 people involved, including health care workers, relatives, patients, people who had been hospitalized and representatives of Culture and Art on our territory. Re-interpreting with concrete, human and symbolic terms a great pain. Connect the different levels of human using symbolism: a garden, an olive tree, earth and water.

Conclusions

A new publishing project is rising, and it recognizes the great human value to the narratives received. It's a gift to the community for the following secular ceremony (02-07-21).

Contact: TRENTALANGE ANNA GIOVANNA
AZIENDA OSPEDALIERA ORDINE MAURIZIANO
LARGO TURATI 62, 10128 TURIN,
atrentalange@mauriziano.it

Fighting SARS-CoV-2 through promotion of self-initiated notification of recent contacts

MATHIS-EDENHOFER Stefan, SCHNEIDER Peter, SCHMIDT Andrea, CZASCH Caroline

Introduction

The containment of SARS-CoV-2 infections through non-pharmaceutical interventions is still insufficient. Digital and conventional contact tracing struggle with problems like significant delays in the flow of information, low acceptance and diffusion and limited ability to remember relevant contacts. Failure of containment is particularly critical in the case of SARS-Covid-19, where asymptomatic or pre-symptomatic infections (spreaders are not aware of their infectiousness) account for a large proportion of infections.

Purpose/Methods

Using published reports on contact chains, we model the impact of self-initiated notification of close contacts by infected and test-positive individuals on the daily case incidence rate and the effective reproduction number.

Results

Self-initiated notification of close contacts aims to stop the 'silent' spread in the pre-symptomatic contagion phase (2-3 days prior symptom onset). Our model-based analyses show that a reduction by 50% of the daily case incidence is achievable. Higher reduction rates are possible in contact networks with higher rates of pre-symptomatic transmissions.

Conclusions

Self-initiated notification ("my test result could be yours") targets the relevant sub-population and is associated with low cost, low risks, and low technical/organizational effort. When notified, close contacts become aware that they are at higher risk - and may better carry out well-known preventive measures including testing, quarantine, or isolation. Our analyses show that this measure can reduce the daily case incidence.

Contact: MATHIS-EDENHOFER Stefan
GÖG
Stubenring 6, 1010 Vienna,
stefan.mathis-edenhofer@goe.at

To take care of who cares for us : stress management it is not only psychological

AGUZZOLI Cristina, LARDIERI Gerardina, PORTOLAN Patrizia, CAMILLI Andrea, CECCHI Adriana, MORASSUTTO Caterina, DE MONTE Ariella, CONTE Alessandro, PIEMONTESE Annamaria, ANDREATTI Maurizio, CUSSIGH Elena, TONUTTI Giuseppe

Introduction

The pandemic has increased the allostatic load of operators. Fear of infecting, of failing in the care task, of neglecting family members, poor nutrition and hydration, often no pause for psycho-physical recovery. In June 2020 we realized an anonymous survey regarding psycho-physical stress symptoms. We observed high prevalence of symptoms (97% of questionnaires collected). We put in action an improvement plan to integrate the activity of the occupational physicians.

Purpose/Methods

We collected 84 health workers on a voluntary basis during July-October 2020. They manifested the wish to recover their psychophysical balance. They participated in 4 follow up consisted of: assessment of presence/absence of Medically Unexplained Symptoms (MUS) as markers of inflammation; measurement of the impact of stress on the nervous system (heart rate variability HRV and vagus nerve activity) and on the body composition (HPA axis). During the follow up the participants were driven with a protocol advices based on lifestyles reorientation based on circadianity.

Results

After the 4 follow up we observed the reduction of MUS Symptoms, as psychological as physical, better balance of the objective stress axis parameters (HRV and HPA), good compliance for lifestyles reorientation, better wellbeing perception. In 2021 we are working to start the long term activity with multiprofessional teams (Physicians, Psychologists and Nurses) in each HPH company.

Conclusions

It's not enough to take care of the psychological stress, because there is a strong relation between body, mind and metabolic pathways. The main mediator is the nervous system, in particular the vagus nerve. Medically Unexplained Symptoms are recently recognized as markers of low grade inflammation stress related. We can check how individual resilience works, modulate it and drive it through personalized lifestyle empowerment.

Contact: AGUZZOLI cristina
Azienda Regionale di Coordinamento per la Salute ARCS-Regional Company for Coordination
Via Vittorio Veneto, 33100 Udine,
cristina.aguzzoli@arcs.sanita.fvg.it

Oral session 5.4: Tobacco prevention and cessation

The Virtual Reality of Smoking and COVID-19: Experience of Re-orienting Services at St Vincent's University Hospital (SVUH) during the Global Pandemic 2020-21 in the Republic of Ireland

LYONS Ailsa, DOHERTY Kirsten, MATTSON Ana, NI EIDHIN Gráinne, STYNES Sinéad, WALSH Caroline, KELLEHER Cecily C., FITZPATRICK Patricia

Introduction

The Global pandemic has necessitated a major public health response. In congregated, high-risk settings such as hospitals, essential frontline services were maintained but many patient services were initially deferred or moved online. To minimise contagion, staff reduced non-essential ward working and out-patient services were curtailed. There is concern this might create unmet need and health promotion services particularly are important. Smoking prevalence in Ireland is 17% and a major risk factor for severity of COVID-19.

Purpose/Methods

We describe how a comprehensive smoking management service was reoriented to sustain accessibility for patients and staff. SVUH, an award-winning hospital, has a longstanding smoking cessation service and was the first in Ireland to ban smoking outright in 2009. There are both in-patient and out-patient services, staff supports and a group six-week stop smoking self-referral programme. All include follow-up evaluation and pilots were documented.

Results

In the first wave, services were limited and staff redeployed. However, by the second and third waves services had been re-configured. Staff continued to take ward referrals but followed up patients by telephone rather than in-person. T-Pro, a secure online video consultation system, was piloted for acceptability. The group programme was delivered virtually online by a facilitator. Patients participated well in all services. The profile of those in the online group was more likely to be middle-aged and female.

Conclusions

The new normal will likely include more distance delivery which is efficient as well as potentially effective. All staff meetings were conducted virtually. The dynamic of 1:1 and group interaction is different but good outcomes are still achievable.

Contact: KELLEHER Catherine Cecily
University College Dublin
Woodview House, Belfield
4 Dublin, cecily.kelleher@ucd.ie

Change to online delivery of a smoking cessation course in response to COVID-19

MATTSON Ana, DOHERTY Kirsten, LYONS Ailsa, NI EIDHIN Gráinne, STYNES Sinéad, KELLEHER Cecily C., FITZPATRICK Patricia

Introduction

In March 2020, in-person smoking cessation courses, running for many years at St Vincent's University Hospital, were converted to online delivery due to COVID-19. The difficulties in forming supportive networks online and lack of carbon monoxide monitoring for motivation when developing an "ex-smoker" identity were concerns. The aim of this study was to compare in-person and online participation and quit rates.

Purpose/Methods

The six-week programme was slightly adjusted for online use. Pre-course meetings, with individuals or in small groups, were organised to meet participants and sort technical issues. Registration and follow-up data were analysed from January 2015 – February 2020 (in-person group 6-week course; 272 participants) and March 2020 – April 2021 (online group 6-week course; 35 participants). Data was also available for 107 in-person and 23 online participants who completed evaluation forms.

Results

Online participants were more likely to be female (71.4% vs 58.9%; ns), have a mean age five years younger (45.8 vs 50.9 years; $p=0.02$) and have better attendance (participation in 5/more sessions per course [58.8% vs 42.1%; $p=0.06$]) than in-person participants. Online participants were also significantly more likely to use pharmacotherapy (85.3% vs 47.8%; $p<0.001$) and to be quit one month from quit date (56.3% vs 35%; $p=0.02$). "Useful" ratings (from evaluation forms) were similar 98% (in-person) and 96% (online).

Conclusions

The move online was successful, with an increase in quit rates and similar "useful" ratings (from the evaluation forms). All online participants felt they had adequate time to talk. Numbers were smaller; technology requirements may have deterred older smokers. The online cohort was significantly more likely to hear about the course on the internet ($p<0.001$) which has future marketing implications. The awareness of the link between smoking and COVID-19 severity may have positively impacted quit rates.

Contact: DOHERTY Kirsten

St. Vincent's University Hospital
Dept of Preventive Medicine, St Vincent's Univ Hospital
Elm Park, Dublin 4, k.doherty@svuh.ie

Developing Tobacco Free Health Care Services on a National Level in Finland

SANDSTROM Patrick, LUHTA Reetta-Maija, VASANKARI Tuula

Introduction

Health Promoting Hospitals and Organizations in Finland is an association of health care districts and other health care organisations on a national level. A self-audit questionnaire about the implementation of tobacco-free health care services is annually distributed to all members according to the Global Standards of GNTH (Global Network for Tobacco Free Health Care Services).

Purpose/Methods

The self-audit questionnaire includes questions on governance and commitment, communication, education and training, tobacco cessation support, tobacco-free environment, healthy workplace, community engagement as well as monitoring and evaluation. The standards are each scored from 0 (no implementation) to 3 (full implementation) with a maximum score of 144 points. The national tobacco-free health care services coordinator oversees collection of data.

Results

The self-audit questionnaire was answered by 59% of member organisations (13/22). The mean score was 71,5% (103/144). The results varied in different organisations with the highest score being 127 (Gold level) and the lowest 82 points (Membership level). Most improvement was needed in identification, diagnosis and tobacco cessation support (18/30) as well as in education and training (8/12). The best scores were received regarding implementation of a healthy workplace (12,5/15) and governance and commitment (24/30) to the tobacco free policy.

Conclusions

Tobacco control activities are dependent on the level of activity in individual health care districts. Systematic nationwide tobacco cessation training should be provided as well as improvement of monitoring and evaluation on national level. A structure for shared learning through online national meetings is in place and opportunities for more individual consultation on local level are being developed.

Contact: SANDSTROM Patrick

Finnish Lung Health Association, Finland
Sibeliuksenkatu 11 A 1, 00250 Helsinki,
patrick.sandstrom@filha.fi

Global Standards, reviewed in 2015, address key elements known to be important in achieving outcomes for effective tobacco management and tobacco cessation within healthcare services. Each standard is supported by implementation criteria (specific structures and processes) to help guide healthcare services in achieving implementation and monitoring progress.

Purpose/Methods

The GOLD Process is a robust process by which healthcare services are assessed to become GOLD Forum Members. It involves a significant commitment over a number of months to plan and gather evidence of high level performance, including having this performance validated at a regional or national level. This then entitles the health service to be nominated to participate in the international jury assessment process. GOLD Forum members are encouraged to share and showcase their experiences and expertise through a variety of channels during the four years of their membership, thus supporting and motivating other healthcare services locally and internationally in their tobacco management efforts.

Results

Around 70 clinics worldwide are nominated in the Global Network Gold and represent a high level of implementation of the Global Network Concept National and regional networks achieve their progress using the Standards as a core support for implementing GNTH concept. The high-level implementation of all GNTH Standards is recognized within the certificate GNTH GOLD Forum Process.

Conclusions

Candidates in a GOLD Forum Process are awarded this recognition and GOLD Forum membership for a period of 4 years. New members are invited to participate and share their experiences at the Gold Forum event and receive the Certificate and the GOLD Award For all Healthcare Services. It is an inspiring experience to learn from the Gold Forum members which outstanding achievements have been implemented in tobacco prevention. It is an exchange of learning and experience.

Contact: KOALICK Susann

Global Network for Tobacco Free Healthcare Services
GNTH Headquarters, 8000 Zürich,
susann.koalick@ftgs.ch

Gold Forum Certification Process (GNTH)

KOALICK Susann, KURAT Claudia

Introduction

The high-level implementation of all GNTH Standards is recognized within the certificate GNTH GOLD Forum Process. The

Mini Oral Session 1: Structures and processes of health-oriented management systems

Development of health-oriented management systems caring patients with vertebral osteomyelitis

CHEN Changhua, YEN Cuacheng

Introduction

Vertebral osteomyelitis (VO) is a bacterial infection of the spine that leads to in a high rate of disability, and early detection of VO is often delayed. And, early detection of patients at high risk of VO is urgent, and the use of artificial Intelligence (AI) to improve the accuracy of early diagnosis can assist physicians in speeding up the determination of making accurate clinical decisions. Our project will utilize digital medical imaging data from Changhua Christian Hospital of Taiwan. The aim of the study is to develop AI surgical alert system for patients with VO.

Purpose/Methods

VO cohorts were obtained from the Changhua Christian Hospital System, including all the original claim data during 2010 and 2020. Patients with VO (ICD 9 diagnostic codes 721-724, and 730) who were identified between 2010 and 2020 were selected from the database. The clinical validation and subsequent model adjustment will be to evaluate the feasibility of model implementation through actual clinical validation. The model validation is performed by using the easy-to-use CDSS development platform and the subsequent data/model evaluation tools to assess the feasibility of the model. In the clinical validation, we will integrate biostatistics and machine learning related interpretation techniques.

Results

In all, 105 patients with VO and the rate of surgical decompression were 7.2%. At this threshold, the machine learning algorithms had a specificity of 0.93, negative predictive value of 0.99, positive predictive value of 0.51, and F1-score of 0.64.

Conclusions

This study developed an AI surgical alert system for VO patients. The VO AI Surgical Alert System will provide an important information for clinical diagnosis and enhances clinical benefits.

Comments

Our work is focusing on building AI to alarm physicians the surgical indication for patients with VO. Our protocol will show how AI helps in times of uncertainties for surgical intervention. We also share how AI and big data is helping us to transform health and care in a better way to serve patients with VO.

Contact: CHEN changhua

changhua christian hospital

No 135 Nanshiao St., 500 changhua,

chenchanghuachad@gmail.com

Applying lean thinking to shorten outpatients' waiting time of discharge process in the internal medicine wards

CHEN Yi-Ching, HUANG Ching-Fen

Introduction

The long time for discharge from the internal medicine ward is a major crisis for the hospital, which relatively affects the procedure of new patients' admission. The consequences of crowding in the emergency department, increasing patient complaints, and reducing the quality of medical care may result in patient's dissatisfaction with the hospital.

Purpose/Methods

Five procedure reforms were implemented: 1. Improving the execution rate of pre-prescribe discharge, 2. Initiating the key for discharge: altering the schedule of physicians' rounds, 3. Applying visual management and Kanban to shorten the waiting time of discharge for outpatients, 4. Eliminating outpatients' examination and treatment on discharge day, 5. Shortening the discharge procedure of nurses.

Results

Driven by lean thinking, the totality of waiting time for internal medicine outpatients has been reduced from 160 to 112 minutes ($p < 0.001$). The goal achievement rate is 137%, and the progress rate is 30%.

Conclusions

The improvement and strategies are effective. Our study presented the results of applying lean thinking in the discharge procedure of the hospital. We also found the improvement of patient satisfaction, medical quality, decreasing the burden of staff, and increasing the effectiveness of medical services.

Contact: HUANG Ching-Fen

National Sun Yat-sen University

70 Lienhai Rd., 80424 Kaohsiung,

jo0616@gmail.com

Applying the multi-methods approach to enhance the ability of cardiopulmonary resuscitation among general pediatric nurses

YANG Fu-Ling, KO Ya-Ling, CHOU Hung-Chieh

Introduction

In-hospital pediatric resuscitations rarely occur, especially in general wards. During routine rounds, nurses determine whether resuscitation is performed, and conventional basic life support accreditations dictate the requisite quality standards for patient safety. However, these training sessions do not adequately address real clinical circumstances, in part due to the challenge of varying body shapes among children of different

ages; as a result, nurses are unequipped to perform the urgent task of resuscitation.

Purpose/Methods

From August 1, 2019, to May 31, 2021, a causal and effect analysis was conducted to identify the causes of nurse under-preparedness in pediatric cardiopulmonary resuscitation and implement solutions. In total, 15 pediatric ward nurses and 3 pediatric residents were enrolled. Self-administered questionnaires, 1-h high-fidelity simulation sessions, debriefing training sessions, and interactive electrocardiogram (ECG) software instruction were used to evaluate nurses' knowledge, individual competencies, and teamwork abilities.

Results

Implementation of the high-fidelity simulation training and team resource management technique increased integrity scores from 50.0% to 85.7% pediatric resuscitation knowledge scores from 46.2% to 90.9%, self-confidence scores from 4.7% to 5.7%, and team emergency scores from 5.4% to 7.4%. Therefore, the objective of this project was achieved.

Conclusions

This project improved the performance of in-hospital pediatric resuscitation effectively enhanced skills and knowledge among team members. Thus, the project will move forward.

Contact: YANG Fu-Ling

National Taiwan University
1F., No. 30, Aly. 1, Ln. 10, Sec. 3, Shuangshi Rd., Banqiao Dist.,
New Taipei City, Taiwan (R.O.C.), 220 New Taipei City,
102047@ntuh.gov.tw

Development of an online tool to support the dissemination of HPH Standards in Austria

METZLER Birgit, KOELLDORFER Benjamin

Introduction

In 2006, a first set of quality standards was published in cooperation with WHO and the International HPH Network. These standards are used as helpful instruments in many national and regional networks. Moreover, orientation towards these standards is a prerequisite for membership in the Austrian HPH Network. Recently, in November 2020, a new, more substantively comprehensive set of quality standards was adopted in the International HPH Network.

Purpose/Methods

These quality standards are an excellent instrument to further disseminate and develop the understanding of and commitment to health promotion in health care services. In order to fulfill this objective in an effective way, the updated international standards are to be prepared as a web-based self-assessment tool for the Austrian context, which, in addition to an assessment of the current situation, also offers instructions for further development.

Results

To ensure sustainable maintenance and upkeep of the online tool, it will be implemented on the ONGKG website. It shall enable a low-threshold access and a nationwide support for

health care services in the sustainable and long-term implementation of health promotion.

Conclusions

The implementation of the online tool is made possible by the support of the Austrian Ministry of Health from funds of Health Promotion 21+.

Contact: METZLER Birgit

Gesundheit Österreich GmbH – Austrian National Public Health Institute
Stubenring 6m 1010 Vienna,
birgit.metzler@goeg.at

Application of Multidisciplinary Team to Improve the Safety of Patients: Reducing the Fall Incidents of Pediatric Oncology Inpatients

LIN Fang-Ru, HSU Ping-Ying, HUNG Te-Chin

Introduction

Patient safety is an important dimension for enhancing the quality of health care. Falls with pediatric oncology patient during hospitalization have resulted in fracture, intracerebral hemorrhage, pain and other serious injury. Hence, an aggressive prevention of falls in children with cancer is very important for improving the quality of nursing care. The purpose of this study was to develop a program for children with cancer under the age of 18 and was to evaluate its effects in the fall prevention.

Purpose/Methods

The setting of this study was about a 24-bed pediatric oncology ward in northern regional teaching hospital in Taiwan from January to December, 2020. The first applied instruments was based on literature review. Data collection were monitored and recorded in hospitalization, including patient's age, caregiver, device, muscle power and injury etc. The main factors identified by data collection were (n=10): lack of physical activity during cancer treatment, lack of recognition of fall prevention by caregivers and loss of information from nursing instrument etc. We worked out those methods: 1. To design "Go together!" program for children: It's increase physical activity can improve muscle power and reduce the risk of fall, especial cancer treatment stage, often requires multidimensional interdisciplinary evaluation and intervention. We implemented non-pharmacologic treatment, such children and caregiver walking together, "kid gifts house" to stimulate children, through the child-friendly healthcare. 2. To increase caregivers' awareness of fall prevention: Caregivers should be educated about the side effects of chemotherapy, physical and cognitive developmental stage of young children etc. 3. To redesign fall prevention from nursing instrument: It adds to new information in instrument when teach caregivers.

Results

Our worked to reduce the incidence rates of falls from 0.13% (2020/1/1-2020/12/31) to 0.03% (2021/1/1-2021/05/31) after implementing the program. These data support the view that the fall prevention in children with cancer is associated with a better outcome of multidisciplinary team evaluation.

Conclusions

Fall incidents in hospitals commonly result in severe injuries and it can lead to adverse consequences including prolonged hospital stays, increasing health care costs, and patient suffering. Our study has shown that fall incidents can be reduced in pediatric oncology inpatients by implementing fall prevention strategies.

Contact: LIN Fang-Ru

National Taiwan University Children Hospital
No.8, Zhongshan S. Rd., Zhongzheng Dist., Taipei City 10041,
Taiwan (R.O.C.), linlyn0101@gmail.com

Rewarming Patients After General Anesthesia

HSIAO Wei-Ling, HSIEH Pei-Yin, CHEN Yi-Cheng

Introduction

According to statistics, The post-general anesthesia patients (N:8820) whose body temperature is higher than 36°C is only 77% after being transferred from the recovery room. Even there were 2 life-threatening events that caused bradycardia and delayed recovery of consciousness due to hypothermia (<34.5°C) after anesthesia, which affected patient safety and increased the length of hospital stay. This project aims to improve the patient who after anesthesia transfers out of the post-anesthesia care unit with a temperature greater than 36°C.

Purpose/Methods

A pre-post study design, divided into two parts, phase I (July to December, 2020) of the nursing education (N:17 nurses) and phase II (January to April, 2021) of implementing the patient's rewarming project after general anesthesia patients (N:6615), we employed versatile and effective strategies that included developing a procedure for the treatment of hypothermia after anesthesia, conduct in-service education of hypothermia care and case discussion courses, adding warming facilities, designed the rewarming flowchart and consistent training for nurses.

Results

The accuracy rate of nurses' cognition of hypothermia care increased from 65% to 100% (pre: 65% ±SD:12.3; post:100% ±SD:0, P<0.001), the completion rate of the warm care process increased from 49.1% to 99.5% (pre:49.1% ±SD:41.3; post:99.5±SD:1.3, P<0.001), and not only the proportion of post-general anesthesia patients (N:6615) whose body temperature is higher than 36°C is 100% after being transferred from the recovery room but the life-threatening events is zero.

Conclusions

Through multiple strategies, nurses can promote the active and efficient rewarming care of patients after anesthesia. The patient's body temperature can be maintained greater than 36 °C after 2-3 hours anesthesia without hypothermia complications.

Contact: HSIAO Wei Ling

National Taiwan University Hospital
No.7, Chung San South Road, 100 Taipei City,
101501@ntuh.gov.tw

Explore the risk factors of unexpected return visit to the emergency department within 72 hours

JUANG Wang-Chuan, HUANG Ching-Fen, YEH Shu-Chuan Jennifer

Introduction

To improve the quality of emergency service and reduce medical waste, the hospital conducts various quality monitoring and reforms to improve the medical service quality. This study is to explore the related factors of unexpected revisit to the emergency department within 72 hours.

Purpose/Methods

The retrospective study was adopted to obtain the patient data of an emergency department in 2019. A structured questionnaire was also designed to collect data on physicians' personalities and work fatigue. Combining data were matched with age, gender, and identity by propensity matching score with a ratio of 1:2. The logistical regression was used to evaluate risk factors of unexpected returning to the emergency department within 72 hours.

Results

Of the 91,582 patients included, 4,086 patients were returned, and had the unscheduled revisit rate of 4.47%. The predictors for URV were: age (adjusted odds ratio [OR] 1.008, confidence interval [95%CI] 1.005-1.011); catastrophic illness (OR=1.209, 95%CI=1.004-1.456); self-discharged (OR=5.167, 95%CI=2.679-9.966), and automatically discharged (OR=1.406, 95% CI=1.096-1.803); length of stay 6-48 hrs. in ER (OR=1.229, 95%CI=1.096-1.823); physician's personality traits of neurotic ([OR]0.966, [95%CI]0.944-0.988); and physician fatigue (OR=0.014, 95%CI=1.001-1.010).

Conclusions

The results found that gender, injury classification, shift, ER crowding, and physician age, and serving year were not insignificant indicators of ER revisit within 72-hr. Patients' age, identity, outpatient status, length of stay in ER, the physician personality of nervous and work fatigue were having statistically impacts. Therefore, patients' age, the identity of severity, and leaving without notice/automatic discharged should be the priority group for outpatients' education. Reforms of workforce adjustment to ease the workload of physicians are essential.

Contact: HUANG Ching-Fen

National Sun Yat-sen University
70 Lienhai Rd., 80424 Kaohsiung,
jo0616@gmail.com

The effects of a weight loss project deployed via a communication application

LIU Hsiu-Chin

Introduction

Obesity is a risk factor for cardiovascular disease, diabetes and certain cancers. In response to this health concern, weight loss programs have become increasingly common. However, it is important to reduce contact between people during the COVID-19 period. Therefore, this project used a communication application to maintain physical distancing during the event. In doing so, this project investigated whether monitoring of a person's lifestyle via a communication application impacted their weight loss.

Purpose/Methods

The project duration was 10 weeks, during which time one diet lecture was provided to all participants by video recording. Participants (N=14) were required to provide weight data weekly, as well as diet and exercise photos through the communication application once to 3 times a week. All photos of body weight data, diet and exercise sent by the participants were checked by the health leader, who also provided encouragement and coaching plans to develop a culture of continuous improvement.

Results

The results are as follows: Participants (N=14) achieved an average weight loss of 7.5kg, with an average reduction in body fat of 3.1%. We found that monitoring body weight, diet and exercise was effective. Participants built a strong collaborative and competitive community to motivate participants toward their goal during this project.

Conclusions

This study demonstrated that the use of a communication application can build strong, healthy relationships. Participants also shared their successes and failures to build a positive attitude toward weight loss. The successful experience gained from this project suggests that such programs could be implemented despite this unique period of maintaining physical distancing.

Contact: LIU Hsiu-Chin

National Cheng Kung University
No.39, Ln. 151, Yangguang 2nd Rd., Shanhua Dist.
Tainan City, hcknzi@gmail.com

Mini Oral Session 2: Enhancing people-centered health care and user involvement

Telemedicine program improves medical environment in remote area using 5G mobile communication in Northern Taiwan

LIN Tzu-Chun, WU Jun-Ting, WANG Jia-Kang

Introduction

Due to inconvenient transportation, diabetic patients living in remote areas often choose nearby clinics for medical needs. However, patients with poorly controlled diabetes or ophthalmic complications need to spend more travel time and expenses seeking specialists and medical examinations. Telemedicine can be carried out in clinics, which is convenient for patients in remote areas to consult medical specialists in medical centers. Therefore, this study aimed to examine the feasibility and outcomes to develop telemedicine in remote areas of Northern Taiwan.

Purpose/Methods

Telemedicine was conducted in the remote clinics of Shiding District and Wanli District. In the remote clinics, patients underwent a non-mydratic color fundus photography examination and physicians used the 5G platform to consult the ophthalmologists in the medical center. Ophthalmologists used the 5G platform to take patients' medical history, read the images and relevant data, make diagnoses and recommendations. Specialist nurses in the metabolic department of the medical center provided diet and lifestyle suggestions to patients with poorly controlled diabetes.

Results

There were 70 patients receiving telemedicine consultation between 2020 and 2021. Most of the patients (93%) did not have diabetic retinopathy, and they only required yearly follow-up by telemedicine. Three patients had non-proliferative diabetic retinopathy, one with proliferative retinopathy and accompanying vitreous hemorrhage, and one with central retinal vein occlusion; accordingly, they were referred to the medical center for further evaluation and treatment.

Conclusions

Using telemedicine communication platforms to promote communication and collaboration between physicians in remote areas and ophthalmologists in the medical center is efficient. Telemedicine improves the accessibility of service for patients living in remote areas.

Contact: TZU CHUN LIN

FAR EASTERN MEMORIAL HOSPITAL
No.21,Sec.2,Nanya S.Rd.,Banqiao District
New Taipei City, coccus112019@gmail.com

The Effect of Sharing Decision-making in Stroke Rehabilitation – The Preliminary Results

LI Ying-Ru, HSIEH Chia-Ying, YIN Ming-Fang, CHAN Hui-Ya, LIU Hsiu-Yun

Introduction

Patients with stroke have to decide the rehabilitation plan after stabilization of acute medical management. This study aimed to explore the efficacy of Patient Decision Aids (PDA) for shared decision making (SDM) of rehabilitation after stroke.

Purpose/Methods

From January to December, 2020, post-acute phase stroke patients were recruited for investigation. The processes were initiated by doctors (Choice Talk), and the discharge planning department use PDA compares differences rehabilitation options, explanation of the advantages and disadvantages, confirmed the understanding of rehabilitation plan of the patients or family (Option Talk). The optimal rehabilitation plans were, according to the patient's values to make decisions (Decision Talk). The efficacy was analyzed by the revised questionnaire developed by Joint Commission of Taiwan.

Results

Of the 63 patients who received SDM in this study, twenty-seven chose post-acute care service in regional or community hospitals, thirty-one transferred to inpatient rehabilitation, three went home, and two were transferred to long-term care institutions. The family had better understanding of the rehabilitation plans after sufficient discussion with the healthcare workers, and was more likely to agree with the rehabilitation plans without anxiety. The averaged satisfaction scores of efficacies increased from 3.40 to 4.18 (total = 5).

Conclusions

With the process of SDM by PDA, patients were able to choose their preferred and valuable rehabilitation plan. This study suggested the benefit for patients to make medical decisions by SDM and PDA.

Contact: LI Ying-Ru

National Taiwan University Hospital
No.7, Chung Shan S. Rd. (Zhongshan S. Rd.), Zhongzheng Dist.,
Taipei City 10002, Taiwan.
Taipei,
109488@ntuh.gov.tw

Implementing the Type 2 Diabetic Patients Based on The Empowerment Model: a best practice implementation project

CHANG Cheng Yu, LIN Pei Ying, YANG Wen Jiu, JIAN Wan Xun, XIE Jia Ying, JIANG Xue Pin

Introduction

Approximately 463 million adults (20-79 years) lived with diabetes, rising to 700 million in 2045. Patient outcomes can be potentially and positively influenced through empowerment to achieve better compliance with their treatment program. The implementation rate of fundus examinations was 36.14% in 2019. This study analyzes the effect of empowerment programs on self-efficacy in type 2 diabetes patients.

Purpose/Methods

In this clinical trial, 120 patients with type 2 diabetes who had inclusion criteria were chosen purposively and divided into control and experimental groups by a randomized block method. The intervention was accomplished through educational sessions scheduled and mobile apps twice a week for four weeks. Diabetes self-efficacy questionnaires were completed before and two months after the intervention for each group. Data were analyzed using the SPSS 22 and the chi-square, exact Fisher's, and t-test statistical tests.

Results

The mean score of self-efficacy was 36.5 ± 12.1 and 37.6 ± 13.2 for the experimental and control groups before intervention. The difference was not significant ($p=0.35$). Two months after the intervention, the mean of self-efficacy was 50.7 ± 13.2 and 40.2 ± 16.5 for experimental and control groups, respectively; and the difference was significant ($P<0.03$). The implementation rate of fundus examinations was increased to 43.30% in 2020.

Conclusions

Patients are empowered when they have the knowledge, skills, attitudes, and self-awareness necessary to influence their behavior. The study using an empowerment program had positive effects on self-efficacy in patients with type 2 diabetes.

Comments

Type 2 diabetes is a chronic disease spreading very quickly worldwide and is second in priority for the investigation of chronic diseases. Patients are empowered when they have the knowledge, skills, attitudes, and self-awareness necessary to influence their own behavior.

Contact: CHANG Cheng-yu

National Yang Ming Chiao Tung University Hospital
No.169, Siao-she Rd., Yilan City, Yilan County 26058, Taiwan
(R.O.C.), 260 Yilan, julie1772@gmail.com

Nursing Experience of Caring for an International patient with Terminal Breast Cancer

TSAI Pei-Jung, LIU Chien-Wei, HSU Wan-Ling, CHENG Heng-Heuwi

Introduction

We live in a global environment, facing many kinds of ethnic group patients in our hospitals. Hospital needs to provide a friendly and respectful environment for patients; therefore providing good communication is very important. This paper describes the nursing experience of hospice care to a terminal ill patient in a foreign country, Taiwan. Mrs. N was continuing to deteriorate in her function. During the period of care, I

developed a compassion relationship with the patient and her family.

Purpose/Methods

The period of care is from 5 December to 20 December 2019. I used Gordon 11 Health Functional Patterns as the framework to evaluate and collect the patient's data through observations, interviews, medical history and physical examination.

Results

Using Gordon-11 Health Functional Patterns, I found the main health problems of Mrs. N were first, lack of intake nutrition, due to lack of familiarity with the food. Second, terminal Pain: due to breast cancer metastasis to the bone. Third, death anxiety: due to progression of disease and worry may die in a foreign country. For problems one, I worked with a dietitian to create a dietary plan for Mrs. N. I helped the family to find a Greek supermarket to buy Greek food and arranged the kitchen for the family to cook for Mrs. N. For problems two, I made sure Mrs. N is pain free. Using standing scheduled doses to control her pain. Offered Mrs. N oil massage and changed position scheduled and as needed. For problems 3, spending more time and listening to her worry; arranging the hospital priest to pray with her. We helped Mrs. N through Messenger to call her children in New York to share her loneliness. She went back to Greece on December 21, 2019, passed away peacefully in two weeks at home with family around her.

Conclusions

Mrs. N was an international patient. For the care team not only language barrier but also culture differences are huge challenges for the team. I lived outside of Taiwan for 16 years and worked as a registered nurse. Due to this experience I was able to communicate with Mrs. N and be a bridge between Mrs. N and the care team to give excellent and safe care.

Comments

A nurse should find a safe and good way to communicate to her patients to provide a best care.

Contact: TSAI Pei-jung

E-Da hospital
445 Broadway Apt. 3C, 811 Kaohsiung,
ed108930@edah.org.tw

Finding High Risk Cases by Community Health Stations.

LI Yu-Jie, KUO Ying-Ling, CHOU Chi-Chun, HUNG Ling-Yu

Introduction

The population over 65 has exceeded 14% in our country, which become an ageing society. Due to demographic structure, lifestyle and medical habit changes, our country was actively promoting a tiered healthcare system. District hospital should develop hospital's characteristics with community-oriented primary care, focus on preventive healthcare and delay of disability, and provide high quality and affordable localized medical services, which enable people to have comprehensive physical and mental health.

Purpose/Methods

In our hospital, we cooperate with the neighborhood to establish community health stations. We provided many kinds of health promotion activities once per month, including health lectures, primary screenings, adult health examination and medical consultations. To achieve the goal of early diagnosis and treatment, when high risk patients were found, we gave individual health education, hospital referral with registration fee discount and follow-up. The efficacy of community health station were analyzed by service records and hospital referral.

Results

Till 2020, 22 community health stations were established. We held 5 adult health examinations with 104 attendances, and 61 primary screenings with 1145 attendances. Among them, abnormal blood glucose rate was 24.4% with the new patient rate of 12.2%. Screening for Dementia abnormal rate was 2.5% with the new patient rate of 1.8%. There were 458 people referred to hospital. Top three departments were Orthopaedics(24%), Cardiology(18%) and Otolaryngology(15%).

Conclusions

By health promotion activities and primary screenings, we could figure out the high risk patients with first-found patient or poor control patients. By increasing participation frequency and creating a healthy community environment, we wish to raise their willingness to engage in healthy behaviors. By the way of continues regular services of community health station, we wish to build community cohesiveness and implement medical localization to break down medical barriers.

Contact: CHOU Chun chen

Yonghe Cardinal Tien Hospital
No.80, Zhongxing St., Yonghe Dist., New Taipei City
Taipei, cthyh103@gmail.com

A Content Analysis of Inpatients' Referral Consultations for Discharge from a Medical Center Experience

HO Li-Chuan, WANG Chia-Chi, CHAN Hui-Ya, TSENG Chia-Lin, JAN Chyi-Feng, LAI I-Rue

Introduction

Despite Taiwan's National Health Insurance with universal coverage has been successfully implanted for 25 years, hierarchical health care system is still under construction. This study aims to analyze the inpatients' referral consultations to delineate the needs for transiting to community care from one medical center.

Purpose/Methods

The data was collected from the referral management center (RMC) of in one tertiary medical center in northern Taiwan. It included the inpatients' and hospital staffs' information about referral consultation, the types of consultation, staff's primary referral reason, patients' disease severity with their preference, as well as the final disposition of the patients. Content analysis method was done for statistical analysis.

Results

From January 2020 to April 2021, a total of 144 consultations were received and categorized into four types: requiring technical support (26.4%), requiring advice by transitional care nurse alone (17.3%), requesting transitional care nurse visits supervised by doctors (30.6%), and requesting physician's visit (25.7%). The successful transfer rate was 74.8%. The main reason for RMC team to visit patients was to provide seamless transitional care for palliative and multi-morbid patients when preparing inpatient discharge.

Conclusions

Comprehensive integrated care assessment with patient-centered approach is mandatory for each referral consultation, which is time-consuming and skillful when initially building up the referral network. Shared decision making and integrating patients' medications care needs help properly transfer patients to the appropriate care locations, including community clinics, regional hospitals or nursing home facilities.

Contact: HO LI CHUAN

National Taiwan University Hospital
No.1, Changde St., Zhongzheng Dist., Taipei City 100229, Taiwan
Taipei City, 003382@ntuhs.gov.tw

The exploration of the preliminary outcome of the completion rate of long-term care evaluation before discharge from emergency department wards

TING Shih-Tan, LIU Hsiu-Yun, CHAN Hui-Ya, LEE Hung-Chun, HSIEH Chia-Ying

Introduction

To facilitate post-acute care among patients after hospitalization, Taiwan government promotes "long-term care" evaluation within 3 days before discharge which can bridge post-acute care immediately when they are back home. This study aimed to investigate the preliminary outcome of the completion rate of long-term care 2.0 version evaluation within 3 days before the patients were discharged from unplanned admission through emergency department.

Purpose/Methods

The study was conducted in general wards for patients admitted from emergency department. Multidisciplinary meeting, education course and handout were implemented to reinforce the concepts of "long-term care" evaluation during January to April 2020. Patients were recruited from May to July, 2020, and "long-term care 2.0" evaluation had been completed before discharge. The completion rate was calculated and compared by historical control in 2019.

Results

During study period, we enrolled 28 patients and completed 75% (n=21) pre-discharge evaluation of "long-term care 2.0 version", which was significantly higher than 43.8% of completion rate in historical control in 2019.

Conclusions

Using multidisciplinary meeting and early planning post-discharge care in addition to education course can assist increase completion of “long-term care 2.0” evaluation, which can bridge home assistance in post-acute care.

Contact: TING SHIH-TAN

National Taiwan University Hospital
Department of Neurology National Taiwan University Hospital ,
No.7, Chung Shan S. Rd. (Zhongshan S. Rd.) , Zhongzheng
Dist., Taipei City 100, Taiwan
10002 Taipei, d106100@gmail.com

Preliminary version

Mini Oral Session 3: Supporting patient behavior change and healthy lifestyles

Employees' attitudes towards the importance of physical activity in the workplace

GIEDRIKAITE Ryte, KUNIGISKIENE Ramute

Introduction

Physical activity is a very important component of a healthy lifestyle that affects not only health, quality of life but also mortality. Various guidelines emphasize that the lifestyles of the people are sedentary and therefore the need to encourage people to change their sedentary lifestyles to more active. The World Health Organization emphasizes that it is ideal to promote adult physical activity in the workplace in order to improve employee health and productivity, improve peer relationships, and increase job satisfaction.

Purpose/Methods

The survey was performed in two municipal administration of the council of Lithuania, from June to September 2019. The study included all employees of administration. A quantitative study was performed using anonymous questionnaire. An online survey was conducted. A link to the questionnaire was sent by email to 215 employees from two municipalities whose email addresses were found on the website. 170 employees participated in the survey, the response rate was 79,1 percent.

Results

The majority (74.1%) of respondents believed that it is important to organize physical activity in the workplace. 85.3 percent of surveyed municipal employees would like to have a physical activity program at their workplace. Evaluating the daily physical activity of employees, was found that on average 267.19 ± 97.61 minutes per day were sitting, while walking for at least 10 minutes took an average of 68.15 ± 25.92 minutes / day.

Conclusions

The most employees find it is important to organize physical activity in the workplace and would like to have a physical activity program in place and be able to participate because of their health. The respondents are often motivated by physical activity to enhance health, manage stress. The employees whose consider physical activity to be important in the workplace and who wish to engage in physical activity at work several times a week are more often and longer physically active.

Contact: GIEDRIKAITE Ryte

Lithuanian University of Health Sciences
A. Mickeviciaus str. 9
44307 Kaunas, Ryte.Giedrikaite@ismuni.lt

Effectiveness of integrated care model for type 2 diabetes mellitus

CHU Wan-O, LIN Chin-Feng, LUO Jiing-Chyuan, LI Ling-May

Introduction

The Diabetes Care Service offers a specialized approach to meet the needs of people who have diabetes. The wide variety of services include education on the management of diabetes and related lifestyle issues, assessment of diabetes management and coping strategies, support for people through visits, telephone contact and advocacy, crisis management and intervention. An effective and persistent disease management plan can improve patient health and save medical costs.

Purpose/Methods

Using the healthcare information system (HIS) in Taipei City Hospital, the study is a longitudinal research among the patients admitted the first Diabetes Care Service in 2017. Data were analyzed Glycated hemoglobin (HbA1c), total cholesterol (TC), triglyceride (TG), and low density lipoprotein cholesterol (LDL-C) changed from Jan. 1 2017 to Dec. 31 2019 by paired sample t-test, and significance (α) was set at p-value < 0.05 by IBM SPSS.

Results

We enrolled 487 patients after the first Diabetes Care Service in 2017 and the mean (SD) age was 60.91 (14.06) years old. During Diabetes Care Service visits from 2017 to 2019, HbA1c (<7.0%) increased from 39.84% to 56.93%, HbA1c (>9.0%) decreased from 21.75% to 7.67%, the level of TC decreased from 174.81 mg/dL to 152.56 mg/dL, TG decreased from 160.73 mg/dL to 145.96 mg/dL, and LDL-C decreased from 107.5 mg/dL to 94.34 mg/dL ($p < 0.001$).

Conclusions

Diabetes is a chronic illness that requires continuing medical care and patient self-management education to prevent acute complications and to reduce the risk of long-term complications. People with diabetes should receive medical care from a physician-coordinated team. Such teams include, but are not limited to, physicians, nurses, dietitians, and pharmacists with expertise and a special interest in diabetes. It is essential in this collaborative and integrated team approach that individuals with diabetes assume an active role in their care.

Contact: LIN Ching-feng

Keelung Hospital Ministry of Health and Welfare
Shin-Erh Road 268, 201 Keelung, chingfeng01@gmail.com

Improve the overweight ratio of body mass index among the inpatients in a psychiatric teaching hospital

LIU Hsiu-Chu

Introduction

The mental disorder clients have easily developed hypertension, diabetes, and cardio-vascular diseases in their later life. Most of

their physical dysfunction comes from their lifestyle, exercise habits and food choice. The physician's recommendation for their anti-psychotics is also very important for their psychotic symptoms and side effects. In this project, teamwork and well communication help the inpatients change their daily activities and diet choice. The staff also change their empowerment skills to help each other for the better quality of life.

Purpose/Methods

Shared decision making to let clients to choose their food and do exercise to keep young and healthy. There are many classes and group therapies and activities for clients to participate. Job training and recreational therapy are the rehabilitation program for clients to feel hopeful and energetic.

Results

To observe their progression, we measure the BMI and abdominal circumference. The improvement of the clients are recorded. In the past two years, the average ratio of BMI more than 27 was 28.8%. In this year, the average ratio of BMI more than 27 was 24%. Although, the inpatients of day care center are still cannot improve their BMI in a dramatic way, they can change their food choice and participate more activities in the day time. They also change their family's life style.

Conclusions

Although most of the clients still don't like to be controlled, they preferred tasty food and would rather to be overweight. We need to adapt ourselves to practice health promotion first. "Action speak louder than words". We still need to work on the muscle strength for lower limbs to improve the metabolic rate and to decrease the fall risk for the elderly clients.

Comments

There are some trouble happened when the clients feel tired. They had try to decrease the exercise sequence or liked to have instant noodles for midnight snack. It's hard to persuade clients without participating in health promotion program. We need to persuade ourselves first to exercise regularly and lead our clients to participate in the classes and choose the right healthy food for themselves during lunch break.

Contact: LIU HSIU-CHU

Kaohsiung Municipal Kai-syuan Psychiatric Hospital
#130 Kai-Syuan 2nd Road, Linyard District
802 Kaohsiung, elitedo@hsliu@gmail.com

3-Day Light Meal to Improve Health Status

YU Hsin-Ting, WEN Shang-Yu, YANG Yu-Wen

Introduction

With the development of economy, most people in China take food with high calorie much more than what they need. People in northern China like to take meals and oily food rather than vegetables. Unhealthy diet habits could result in health problems, such as overweight/obesity, metabolic syndrome and constipation. Orenda Psychosomatic Medical Museum is an organization devoting to promote healthy life style. We launched the 3-day light meal project to change the unhealthy diet behavior of people.

Purpose/Methods

During June 24th to October 7th 2019, there were 60 people experienced the 3-day light meal. The 3-day light meal keep the total calorie in 800-1000 Kcal per day with 6 high-fiber meals, including 5 liquid meals and 1 soft-diet. The diet was made up of lots of green vegetables, whole grains, fish, chicken, egg, and nuts. All participants measured their body weight before and after taking the 3-day light meal.

Results

There were 55 people finished the 3-day light meal project. 4 people withdrew the project by themselves, and 1 was interrupted because of dizziness. During or after the 3-day light meal project, 54 participants got weight reduction (-0.3% to -4.3%). The average of body weight was 68.56 and 67.22 Kgs respectively before and after the 3-day light meal project. The body weight reduction rate was 2%. Some participants with constipation or sleeping problem also got improvement after the project.

Conclusions

From our study, we found the 3-day light meal project had immediate effect on weight reduction. It is also helpful for people with constipation and sleeping problem. Healthy diet could improve health status. However, we still need more evidence to detect the intermittent or long-term effect of the 3-day light meal project.

Contact: YU Hsin-Ting

Changhua Christian Hospital
Nan-xiao st. 135, Changhua,
42970@cch.org.tw

Application of Machine Learning to Establish Early Prediction Model for Colorectal Cancer Risk

CHENG I-Chin, TSAI Ching-Yen, SU Chih-Sheng, HUANG Hui-Ting, JOU Hei-Jen, CHIEN Pei-Li, LIAO Pei-Hung

Introduction

According to the 2019 journal CA: A Cancer Journal for Clinicians, 1,762,400 new cancer cases were projected per year, equivalent to 4800 diagnoses per day. In males, the most prevalent types of cancers were prostate, lung, and colorectal cancers with colorectal cancer accounting for 42% of all cases; while in females, breast, lung, and colorectal cancer were the most prevalent types with colorectal cancer accounting for 50% of all cases.

Purpose/Methods

Content analysis was performed mainly on outpatient examination medical records collected from January 1, 2010 to December 31, 2018 at a hospital in northern Taiwan. The patients ranged from 20 to 80 years. The data mining techniques used in this study were primarily analyzed using neural networks and random decision forests. The random forest predictor would automatically generate dissimilarity measures between the observed values. In addition, the random forest dissimilarity measures between unlabeled data can also be defined.

Results

The neural network (supervised) and random forest (unsupervised) methods were used to perform a weighted analysis of the risk factors. In regards to the effect magnitude for each dependent variable factor, physical examination was of greater importance than other factors. The overall predictive accuracy of the neural network was 78.1%. It was most effective in predicting a patient's SGOT, SGPT, and TG levels. Additionally, diet is a relatively important factor.

Conclusions

Cooking foods at high temperatures releases carcinogenic substances such as heterocyclic amines and polycyclic aromatic hydrocarbons, which correlate directly with carcinogenicity. Going forward, more research should be done on key trigger factors of environmental hormones such as food containers and the use of plastics. The results of this study revealed a greater frequency and higher mortality rate of colorectal cancer in males than females, which could be correlated with work and stress. More research should be conducted in this regard.

Contact: LIAO Pei-Hung

National Taipei University of Nursing and Health Sciences
No.365, Ming-te Road, Peitou District, Taipei City
112 Taipei, peihung@ntunhs.edu.tw

0.41<0.05), the behavior change score increase from 10.24 to 10.53 ($p=0.20<0.05$), the cognition of smoking hazard increase from 24.23 to 24.79 ($p=0.001<0.05$). The smoking refusing intention score, behavior change, and cognition of smoking hazard of experimental group were significantly improved. The most significant change was found at smoking hazard score increase.

Conclusions

Junior and high school students' smoking rate decreased and smoking refusing intention, behavior change, and cognition of smoking hazard significantly improved after intervening smoke free campus plan with health promoting school model. To prevent smoking for adolescent, the smoke free campus plan with health promoting school model was suggested. And most significant improve was noted at smoking hazard score increase.

Contact: WANG Lu-Kai

Changhua Christian Hospital
No.135, Nanshiao St., Changhua City
500 Changhua County,
wnc10101@gmail.com

The effect of Smoke Free Campus Plan intervention

WANG Lu-Kai, HUANG Ya-Wen, WANG Jiun-Yi, LAN Shou-Jen

Introduction

Cigarette smoking is one of the leading preventable risk factors contributing to morbidity and mortality. The age of smoking is getting younger and younger. We designed an smoke free campus plan to reduce the smoking rate in adolescents. To evaluate the effectiveness of smoke free campus program - smoking prevention, Control and Education Intervention on smoking rate, smoking refusing intention, behavior change, and cognition of smoking hazard for Junior and High School students in Taiwan.

Purpose/Methods

After developing the smoke free campus plan with health promoting school model, we enrolled 4514 Junior and High School Students. All the students assigned into experimental group and control group, 2236 in Experiment group, and 2278 in Control group. All the students completed pre-test and post-test. The experimental students accepted 6-month smoke free campus plan intervention, all the same intervention, including • Self-Confidence Improve • Knowing Smoking Hazard • Establish Social support to stop Smoking • Knowing Your Media of Smoking Advertisement • Refusion of Smoking Technique while control group students didn't. The effectiveness of the smoke free campus plan intervention will be evaluated by t-test with SPSS.

Results

The smoke free campus plan with health promoting school model, after the smoke free campus intervention, smoking rate decreased from 3.98% to 1.89% (t-test $p<0.05$). The smoking refusing intention score increase from 7.25 to 7.67 ($p =$

Mini Oral Session 4: Health promotion responses to the COVID-19 pandemic

Relationship between water intake and quality of life in the elderly during COVID-19

KIM Kue Sook, KIM Seok Yeon, RYU Heui Geun, LEE Ji Hong, LEE Yu Jeong

Introduction

Moisture is the most important factor, accounting for 60% of the total weight of the human body and is indispensable for survival. Deficiency of the total amount of body fluid that this water lacks in the body is dehydration and is usually common in older people. Dehydration not only causes various symptoms such as urinary tract stones, constipation, orthostatic hypotension, decreased cognitive function, and falls, but is also known to increase mortality and low quality of life. The purpose of this study is to provide the basic data to prepare the importance and countermeasures of water intake by grasping the relationship between the inhibitory factors of water intake, the amount of water intake and the quality of life of the elderly.

Purpose/Methods

This study analyzed 1,540 subjects who were over 65 years old and responded to health questionnaire, examination and nutrition survey in 2017. Moisture intake was analyzed by t-test and ANOVA, and correlation between water intake and quality of life was also analyzed.

Results

Water intake was statistically significant in terms of age, gender, marital status, physical function and cognitive function, and there was a positive correlation between water intake and quality of life.

Conclusions

In elderly people, drinking water can lead to health problems associated with dehydration, which can lead to poor quality of life. Therefore, it is necessary to educate the elderly about the importance and method of water intake and to prevent secondary health problems.

Contact: KIM KUE SOOK

Seoul Metropolitan Don Bu Hosp Health Promotion Center/
KIHIP, Seoul National University College of Medicine
mdkimks00@gmail.com

Stress of caring for COVID-19 patients among clinical nurses

KUNG Su-Ying, LIN Feng-Lien, CHUANG Pao-Yu

Introduction

This study aimed to explore nurses' stress and its influencing factors among clinical nurses when caring for COVID-19 patients during the coronavirus disease 2019 (COVID-19) pandemic in Taiwan.

Purpose/Methods

A cross-sectional study was conducted in a medical center during the outbreak of COVID-19 between March and May 2020 in Taiwan. The questionnaire included items on the demographic characteristics and a scale to assess stress among clinical nurses caring for patients with highly infectious diseases. The scale of 0-4 (0: not at all, 3: more severe than usual) of each item is rated to assess the degree of stress. Descriptive statistics and ANOVA were used to analyze the data.

Results

The high-stress scores were observed for the five items "wearing personal protective equipment (PPE) is time-consuming and unable to deal with patient problems immediately(2.36)", "feeling overloaded(2.32)", "fear of transmitting the disease to relatives and friends(2.32)", "insufficient assistance in an isolation room (2.31)" and "uncomfortable with PPE, and the activities are limited(2.25)" from 495 valid questionnaires. Among participants who had the experience of caring for patients with highly infectious diseases, the stress was lower than those without the same experience.

Conclusions

The burden of caring for COVID-19 patients was the major stressor for the participants, followed by the discomfort caused by PPE. The nurses' experience of caring for patients with highly infectious diseases may influence the level of stress.

Contact: LIN Feng-Lien

National Taiwan University Hospital
No.7, Zhongshan S. Rd., 100225 Taipei,
lotus@ntuh.gov.tw

Impact of the COVID-19 Pandemic on Emergency Department Visits

CHU Wan-O, LIN Ching-Feng, LUO Jiing-Chyuan, LI Ling-May

Introduction

Severe Acute Respiratory Syndrome coronavirus 2 (SARS-CoV-2) is an emerging contagious pathogen that has caused community and nosocomial infections in many countries. In 2020, as the impact of the COVID-19 Pandemic, the National Health Insurance Administration of Taiwan found that emergency department (ED) visits declined. One notable effect of these variables may be a change in the number of emergency department (ED) visits. This study aims to investigate the effects of COVID-19 on ED visits, and possible reasons for changes.

Purpose/Methods

Using the Healthcare Information System (HIS) in Keelung Hospital, Ministry of Health and Welfare, the study is a longitudinal research among the patients admitted ED during March 1, 2019-April 30, 2019 and 2020. In addition, ED visits during 2 months were compared using mean differences and ratios. This study is analyzed total ED visit volume, as well as patient age, sex, and reason for visit by paired sample t-test, and significance (α) was set at p-value < 0.05.

Results

During the COVID-19 pandemic, the HIS found that ED visits declined 28.8%, from a mean of 3,777 to 2,691, 24.8% among males and 32.7% among females per month (March 1–April 30, 2019 to March 1–April 30, 2020). The top 6 diagnostic categories included 1) fever, unspecified; 2) vertiginous syndromes; 3) acute abdomen; 4) chest pain, unspecified; 5) noninfective gastroenteritis and colitis, unspecified; 6) acute upper respiratory infection, unspecified.

Conclusions

During an early 2 months interval in the COVID-19 pandemic, ED visits were substantially lower than during the 2 months period during the previous year. Ministry of Health and Welfare should continue to address public concern about exposure to COVID-19 in the ED through adherence to CDC infection control recommendations, such as immediately screening every person for fever and symptoms of COVID-19, and maintaining separate, well-ventilated triage areas for patients with and without signs and symptoms of COVID-19.

Contact: LIN Ching-feng

Keelung Hospital Ministry of Health and Welfare
Shin-Erh Road 268, 201 Keelung,
chingfeng01@gmail.com

Infection Prevention Measures of Health Examination Department in Coping with COVID-19 Epidemic

LEE Meng-Szu, DAI Chia-Yen

Introduction

The Health Examination Department (HED) of Kaohsiung Medical University Chung-Ho Memorial Hospital (KMUH) is mainly engaged in health checkup services for patients, where most of employees have no experience in combating with COVID-19 before the coming of epidemic pandemic threat. To ensure the health and safety of employees and patients in the HED site during the pandemic, the objective of this paper is to formulate the appropriate epidemic prevention measures for fighting COVID-19.

Purpose/Methods

The director of the HED formed a PDCA team to formulate anti-epidemic measures and implementation rules in response to the COVID-19 epidemic according to the anti-epidemic policy of the Ministry of Health and Welfare of Taiwan. Additionally, a member of the team was appointed to check the effectiveness of implementing the epidemic prevention work and to regularly propose improvements.

Results

The anti-epidemic measures and implementation rules formulated by the PDCA team could not only ensure the health and safety of employees and participants, but minimize the risk of group infection as well, so that all patients could complete the health check without fearing infection. Due to the strict implementation of epidemic prevention and control measures, fortunately no one has been infected so far, which implies the formulated anti-epidemic measures can effectively respond to the COVID-19 epidemic.

Conclusions

To combat the COVID-19, rigorous anti-epidemic measures and detailed practical implementation plan are needed, and the concerted efforts of all staff in fighting the epidemic are also important. HED employees must clean and disinfect equipment and supplies at any time to ensure all participants is protected from infection. In view of the continuing threat of COVID-19, everyone is necessary to participate in epidemic prevention work together, so this article shares the epidemic prevention experience of the HED in KMUH.

Contact: LEE Meng-Szu

Kaohsiung Medical University Hospital, Kaohsiung Medical University, No.100, Tzyou 1st Road
807 Kaohsiung, www.kimo@gmail.com

The nurses' willingness and needs to participate in care of COVID-19 patients in Taiwan

LIN Feng-Lien, KUNG Su-Ying, CHUANG Pao-Yu

Introduction

The coronavirus disease 2019 (COVID-19) pandemic has increased the risk of becoming infected in clinical nurses. Maintaining the nurses' willingness of caring for COVID-19 patients and applying the nurses' needs are the key components of the healthcare system. This study aimed to explore clinical nurses' willingness and needs to care for patients with COVID-19 in Taiwan.

Purpose/Methods

A cross-sectional, descriptive study with a web-based survey was conducted in an academic hospital in March 2020 in Taiwan. The questionnaire included items on the demographic characteristics and a scale to assess the willingness and needs among clinical nurses caring for patients with highly infectious diseases. The scale of 0-4 (0: not at all, 3: very much) of each item is rated to assess the degree of willingness and need. Descriptive statistics and ANOVA were used to analyze the data.

Results

A total of 495 valid questionnaires were collected. The nurses' willingness for caring the patient with COVID-19 was below 1.51. For the participants with the experience of caring for patients with highly infectious diseases, the willingness was higher than those without the experience of care ($p < .05$). The five highest scores of need were observed for the items "sufficient personal protective equipment (PPE)" (2.90), "increase manpower support" (2.82), "increase vacation" (2.75), "increase the time of

drinking water and meal”(2.73) and “provide the latest epidemic information”(2.71).

Conclusions

The nurses' willingness for caring the patient with COVID-19 was low in this study. The nurses' experience of caring for patients with highly infectious diseases, willingness was higher than those without the experience of care. The physical domain was the major need for the participants, followed by the psychological domain.

Contact: LIN Feng-Lien

National Taiwan University Hospital
No.7, Zhongshan S. Rd., 100225 Taipei,
lotus@ntuh.gov.tw

The exploration of the resilience among new nurses at the first three months

LIN Yueh-E, CHIEN Li-Yu, HU Mei-Lien, LIN Chiu-TzuTSENG: Sened

Introduction

The capability of resilience can help the new nurses overcome transition stages, especially when Covid-19 is continuing to spread around the world. Nurses are the first-line workers and provide daily care, it is essential to understand resilience capability and helps to promote better health for the new nurses. The study aimed to explore the resilience changes for new nurses in the first three months.

Purpose/Methods

This is a longitudinal study design. We recruited 41 new nurses. Every nurse completed the Brief Resilience Scale by Hsiao(2019). The scores range from 10-50, the higher score means the better resilience capabilities of new nurses during their daily work. The data were collected at four time points- the end of the first week, first month, second month, and the third month.

Results

The result showed: 1. The resilience capabilities of new nurses at the four time points measurement were 39.37 ± 4.16 , 36.56 ± 7.49 , 37.93 ± 6.83 , and 36.38 ± 7.94 , respectively. At the first week, the new nurses had higher resilience score. The resilience levels scored the lowest scores at the third month when they started to care patients independently. 2. We compared retention vs turnover during the first second months. There were differences during the first week to the second month (40.04 ± 4.15 vs. 38.20 ± 4.04 , $t=1.38$, $p=.176$; 38.32 ± 5.68 vs. $30.29 \pm$, $t=2.76$, $p=.010^*$; 38.67 ± 6.88 vs. 32.00 ± 2.00 , $t=3.67$, $p=.004^{**}$ respectively) The group was no difference at first week, but it was significant difference during the first month and second month. When they felt low resilience and trended to turnover.

Conclusions

It's an important to understand the relationship between resilience changes and retention rate of new nurses. Our study shows the higher resilience score relates to the better retention rate of new nurses. The results of this study can serve as a reference for nursing administrators to understand the resilience

change of new nurses, and its relation with retention rate of new nurses.

Contact: LIN Yueh-E

Linkou Chang Gung Memorial Hospital
5, Fu-Hsin Street, Kweishan 333, Taoyuan
Taoyuan, amy436643@cgmh.org.tw

Mental health of healthcare workers during the COVID19 pandemic

PESCE Luisa, GILTAY Erik J, RIUS OTTENHEIM Nathaly, SIMONELLI Ilaria, IMOLI Maria, AGOSTINI Claudio

Introduction

During the COVID19 pandemic, healthcare workers experienced unprecedented workload conditions and high risk of infection. The actual extent and the possible consequences that these events might have on mental health are still largely unclear.

Purpose/Methods

We aimed to assess mental health among healthcare workers during the COVID19 pandemic in a large hospital located in the north of Italy. The online survey included among others, revised SARS-questionnaire and Inventory of Depressive Symptomatology (IDS).

Results

The 307 participants who completed the survey in March/April 2021 had a mean age of 43.9 y; and 205 were female 205 (67%). Of those, 49 (16%) were medical doctors, 162 (53%) nurses, 24 (8%) rescuers, 39 (13%) healthcare assistants, and the remaining 33 (11%) technicians or administrative staff. The perceived COVID19 infection risk was high (70%), with 93% of respondents reporting high levels of stress, mostly related to the fear of infection (70%), while 79 (26%) had been infected by COVID19. Most (89%) worried about infecting relatives, and 11% reported the intention to resign. Anxiety and depressive symptoms were reported by 69% and 62%, respectively, being both higher in women (75% and 77%) than men. Medical doctors and nurses had a higher prevalence of anxiety and depressive symptoms than other groups.

Conclusions

Symptoms of stress, worry, anxiety and depression were highly prevalent in healthcare workers during the COVID19 pandemic. Their consequences for long-term mental health, work engagement, quality of care, drop-out, and consequently the health care system at large could be extensive.

Contact: PESCE luisa

APSS - azienda provinciale servizi sanitari
trento, luisa.pesce@apss.tn.it

Mini Oral session 5: Applying the HPH settings approach to specific target groups

Effects of Educational and Direct Intervention Strategies for the Health Promotion in the Pre frail Elderly

HUANG Tzu-Hsiu, LIAW Lih-Jiun, KUO Li-Chi

Introduction

As the number of geriatrics is steadily increasing, it is very important to detect the pre frail people and provide the early intervention to maintain their health fitness. But the pre frail elderly often have difficulties to attend the physical therapy department regularly and diminish the frequency to go out beyond the impact of COVID-19. This study aimed to compare the effectiveness of the educational intervention and direct intervention by physical therapist in improving the health fitness of the pre frail elderly.

Purpose/Methods

The community-dwelling elders were recruited from the clinics of Geriatric Department of Kaohsiung Medical University Hospital in Taiwan in 2020. The participants were allocated into the education group and the exercise group. Grip strength, the Five Times Sit to Stand Test (5XSST), and the Timed Up and Go test (TUG) were evaluated and home exercises were instructed by physical therapist. The exercise group accept six physical therapy sessions in one month additionally. The outcome was assessed by independent t test.

Results

Thirty-seven participants were allocated as the education group (n = 16, age=78.7±6.1years) and the intervention group (n = 21, age=79.3±7.2 years). There are no differences between two groups in age (p=0.791), height (p=0.628), and weight (p=0.435). After the intervention, the exercise group had more changes in all tests than the education group, but no significant difference was shown between two groups (grip force: t(35)=-0.83, p=0.413; 5XSST: t(35)=-1.11, p=0.276; TUG: t(35)= -0.65, p=0.518).

Conclusions

Our results showed the effect of educational intervention provided no less benefits though there was a non-significant trend for pre frail elderly to have higher scores with direct physical therapy intervention. This may be related to the limited duration of direct intervention (one month), the forms of educational material, and the simple form of exercises. In this study, we provide educational intervention one on one with direct demonstration and the handbook of strengthening exercises using the elastic band and body weight.

Contact: HUANG TZU-HSIU

KAOHSIUNG MEDICAL UNIVERSITY HOSPITAL, KAOHSIUNG MEDICAL UNIVERSITY, KAOHSIUNG, 100 Tzyou 1ST Road 807 KAOHSIUNG, tzuhsiu.grace@gmail.com

The Taiwan long-term care 2.0 policies program on elders with dementia: A preliminary study at a day care center in Northern Taiwan

CHEN Sung-Yun, HUANG Su-Cheng, YEH Chu-Chuan, KAO Yi-Fong, YEH Feng-Chen, CHEN Ya-Fang

Introduction

Taiwan became an aged society in 2018 and the care of the elders is a public issue. According to the Taiwan long-term care (LTC) 2.0 policies established a day care center for people with dementia. Our center accepts and treats elderly people with mild to moderate dementia. The study aims to understand whether the services of the daycare center can delay the cognitive disorder and disability of the elders and whether the main caregivers can reduce the pressure of care.

Purpose/Methods

The study period is from January 2019 to December 2020. First, day care services: provide cognitive training, art therapy, music therapy and other courses to improve cognitive function. Second, rehabilitation training: evaluate the activity function and needs of each case, and formulate individual rehabilitation plans. Third, transdisciplinary team meetings are held every month. Forth, provide the caregiver support system: hold family support and skill training courses every month. Fifth, case concern: use the telephone to track cases and evaluate their home life every 2 to 3 weeks. Collect case activity of daily living (ADL) and instrumental activities of daily living (IADL) data before and after the research. The Kingston Caregiver Stress Scale (KCSS) is used to evaluate the stress of the main caregiver.

Results

A total of 68 cases and their main caregivers were enrolled. The average age of the cases was 85.6 years old, and the average age of caregivers was 55.6 years old. After day care center services and related intervention measures, we found that the case's ADL average score increased from 72.2 to 77.9 points, and the IADL average score increased from 6.2 to 10.9 points (p<0.01). The KCSS score of the main caregiver from 2.83 points (mild to moderate stress) down to 1.65 points (mild stress) (p<0.05).

Conclusions

According to the results show that the services of the daycare center which can improve the effectiveness of people with mild to moderate dementia in maintaining physical functions, ADL and IADL function. And it also can reduce the care pressure of main caregivers and empower them.

Contact: TSAI YI-FAN

Taipei City Hospital, Young Ming Branch
No.105, Yusheng St., Shilin Dist., Taipei City 11146, Taiwan
10453 Taipei, b1717@tpech.gov.tw

The study of Self-management of stress (SMS) of Yoga program for teenagers of drug abuser in Taiwan

LIN Shu-Ling

Introduction

There are increasing of new drugs. It's serious for drug in teenagers day by day. It's start to change the physical and mental in juvenile stage. It's due to face the environment effects, physical and mental changes. Let them anxious or depressed when face the pressure. Even to happen deviation behavior.

Purpose/Methods

In this study, 36 teenagers of drug abuser process applied to join SMS program have divided into 18 participants in both control and experimental group by draw. 24 sessions of Yoga program were conducted once a week for 6 months for experimental group. Verbatim used to gather more feedbacks from the interview followed by each Yoga sessions. Brief symptom Rating scale also conducted pre and post experiment for 36 participations.

Results

Overall score of Brief Symptom Rating Scale reduced 16.92 points and suicide drop 12 points in experimental group, compared to the control group increasing 12.34 point of overall score and suicide add 7 points. Feedback from interviews showed participations improved in emotion, physical health and stress management. They indicated having more positive emotion daily, having better emotional control, reduced anxiety, reducing stress and changing the quality of interpersonal relationships.

Conclusions

SMS of Yoga program in this study included four key training directions which were stimulation, relaxation, awareness and pranayama lead a great improvement of stress management for pregnant lady. Throughout this Yoga program, teenagers learned to ignite eustress, remove distress, create calmness and breath slows down. As the result, Yoga program has helped teenagers in experiment group lower their tension, and bring the extra benefits in emotion and relationships. It support teenagers to overcome their withdrawal symptoms.

Comments

An unexpected result of this study showed all participants reduce withdrawal symptoms since they engaged in SMS program, and no one absent from course due to the benefits of it. We strongly suggest that SMS can be a add of medication for drug abuser.

Contact: HSU Jason

Chang Bing Show Chwan Memorial Hospital
No.6, Lugong Rd., Lugang Township
Changhua, showchd@gmail.com

Exercise teaching program for Parkinson's disease: Yoga and Stretching

LEE Jee-Young, LEE Jaekyung, HEO Eunyung, LEE Jin Yong, CHOI Suyoung, SEOL Dongwon, SONG Kyoungjun, PARK Minhyun, LEE Jae Hyup, KIM Byeong Gwan

Introduction

It has been reported that exercise provides benefits for people with Parkinson's disease in controlling motor and non-motor symptoms alongside the pharmacological intervention for parkinsonism. Also, it is known to prolong patients' independent mobility and improve patients' general quality of life including mood, memory and socialization.

Purpose/Methods

In SMG-SNU Boramae Medical Center, department of Neurology and HPH team designed a pilot program of yoga training for Parkinson's disease patients. Participants had openly registered at outpatient clinic of Neurology. The classes were scheduled four times in 2019. Each class was open to 25 people who were able to stand up and sit alone without assistance. The short-form 8-item Parkinson's disease questionnaire (PDQ-8) was administered to assess patients' health-related quality of life before and after training.

Results

The total number of participants was 74. Sixteen patients had answered the questionnaires twice. The average PDQ-8 score reduced from 9.32 to 7.75 after yoga class participation. Especially on items regarding troubles with communication and depression, scores decreased by 0.63 points and 0.39 points, respectively. Also, satisfaction survey on a five-point scale showed overall satisfaction of average 4.41 points; the two questions, 'Was the exercise program useful?' and 'Did it give you a will of exercise?' got 4.27 and 4.41 points, respectively.

Conclusions

In this pilot program, participants had positive experience from the yoga training class. Their average PDQ-8 sum score was decreased by 1.57 points and their perceptions on ADL and mood was improved after participating the class. As patients requested a long-term program since their disease tend to worsen over time, we are considering sustainable program and collaboration with the community and local government in the near future.

Contact: CHOI Suyoung

SMG-SNU Boramae Medical Center, Boramaero 5gil, Dongjak-gu
07061 Seoul, 1030kitty@hanmail.net

From the outpatient clinic for migrants to proximity prevention and care

FORNERO Giulio

Introduction

Association Camminare Insieme since 1993 in Turin, Italy: Outpatient clinic for foreigners and needy people, Mother and Child Health Center; about 5.000 patients per year. During the pandemic, planning to overcome the walls of the outpatient clinic and to initiate prevention and proximity care in the places where patients live

Purpose/Methods

Since the beginning of 2021, participation in regional programs of free rapid antigen diagnostic tests for migrants and homeless people and prevention and health care interventions in the proximity in favor of the people welcomed in the shelters of the Municipality of Turin, regular and non-regular foreigners, homeless people and, in particular, people with mental health and addiction problems. Collaboration to increase adherence to cancer screening programs for migrants and homeless.

Results

The Turin Health Unit is now requesting collaboration to Camminare Insieme for the vaccination of migrants and homeless people. The Municipality of Turin is now requesting collaboration for homeless people on the street with the skills of volunteer doctors and mental health professionals of Camminare Insieme, who will use the relationship tool to bring the most "resistant" people together for personalized assistance projects. The Turin Health Unit is also requesting collaboration to support breastfeeding, starting with the discharge from the hospital of migrant mothers who have given birth.

Conclusions

The decision to go beyond the walls of the outpatient clinic to start proximity prevention and care activities in favor of migrants and homeless people was welcomed by the people we intend to assist and by the Turin Health Unit and the Municipality of Turin, who requested the launch of further programs of proximity prevention and care, and has contributed, among other things, to double from sixty to one hundred and twenty the number of volunteer doctors involved

Contact: FORNERO Giulio

A.O.U. Città della Salute, Corso Regio Parco, 10152 Torino,
g.fornero@camminare-insieme.it

Intervention for Reducing Spread of Vancomycin-resistant Enterococci Colonization

KANG Chia-Wen, TSAI Hui-Ling, CHANG Hsin-Hsin, KAO Hsiu-O

Introduction

Multiple drug resistant organisms (MDROs) spread person-to-person through direct contact; lack of effective contact

precaution and infection control can result in clusters of nosocomial infections, thus exacerbating gravity of diseases and increasing healthcare cost. The intervention aimed at reducing the spread of vancomycin-resistant enterococci (VRE) colonization by strengthening environmental cleaning and disinfection, practicing hand hygiene, and implementing isolation and quarantine.

Purpose/Methods

Installing dispensers of antibacterial/disinfectant wipes, holding hand hygiene promotion activities, developing and implementing MDRO care bundle and auditing mechanism, monitoring terminal cleaning implementation efficiency, designing health education tools (multi-language poster on using personal protective equipment, health education videos in Indonesian, etc.), and reviewing/redrafting protocols for active screening.

Results

The number of patients colonized with VRE was 38 in 2018 (prior to the intervention), went down to 29 in 2019 (during intervention), and dropped further to 7 during January to June in 2020 (after intervention), testifying the effectiveness of the intervention.

Conclusions

(1). Practicing MDRO care bundle and rigorous audits; (2). Holding situated activities to promote hand hygiene and reinforcing self-management of healthcare professionals; (3). Emphasizing the importance that comprehensive prevention against MDRO spread is the responsibility of every stakeholder.

Contact:

No.7, Chung Shan S. Rd., Taipei, 10002, Taiwan, ROC
100225 臺北, s87534524@yahoo.com.tw

To Explore Depression, Stress and Related Factors of Vietnamese Immigrant Women

LI I-Ling, HUANG Yao-Hui, CHEN Xing-Jia, HE Su-Ye, LEE Shih-Kai

Introduction

Immigrant women are often defined as vulnerable groups because they face not only personal problems, but also some problems related to cross-culture. The difficulties they encounter lead to increased extent of stress and depression. However, so far in Taiwan there is still no research on aging of immigrant women and the impact of physical and mental health. The purpose of this study is to explore the depression and stress status and related factors of Vietnam immigrant women.

Purpose/Methods

This is a cross-sectional study. We completed data collection from January 2018 to August 2018. The study objects were Vietnamese immigrant women in Taiwan. The data collection included demographic data, depression status of the Epidemiological Research Center Depression Scale (CESD-Vietnamese version), and stress status of the Perceived Stress Scale (PSS-Vietnam version). The results of the study were statistically analysed by using SPSS software.

Results

A total of 198/220(90%) participants completed questionnaire. The participants' characteristics were 20-44 years old, high school education, good economic condition, in employment and had lived in Taiwan for more than 6 years. The results shows that 46.3% participants reached the extent of depression. Their subject perception of stress is also higher than general population.

Conclusions

Compared to Taiwanese women, Vietnamese immigrant women have a higher incidence of depression and subjective perception of stress. There are several reasons. First, their subjective perceived physical conditions are poorly. Second, lack of interpersonal interaction led to feeling lonely and affect their mood. Third, they usually worked in poorly working environment with negative influence of physical condition. All of these reasons were related to their physical and mental health, and further longitudinal studies are needed.

Contact: LI I-Ling

National Taiwan University ; Tsautun Psychiatric Center,
Ministry of Health and We, 161 Yu-Pin Rd. Tsautun
township(54249), 886 Nan-tou county,
d07426002@ntu.edu.tw

Conclusions

Conclusions: The dedicated team's assisting patients during hospitalization in the evaluation of appropriate transition to the follow-up care can significantly improve the patients' ADL, IADL and EQ5D after discharge from the hospital, and promote the patients' return to community life.

Contact: YIN Ming-Fang

National Taiwan University Hospital, Taiwan
Chung Shan S. Rd. Taipei 10002,, Taiwan, ROC.
[Taipei, 020278@ntuh.gov.tw](mailto:020278@ntuh.gov.tw)

An investigation of effect after transition from hospital to next care status

YING Ming-Fang, CHEN Hung-Hui, CHAN Hui-Ya

Introduction

Background: Discharge planning is to assist patients in assessing the need for follow-up care during the hospitalization period, and to connect with patient follow-up care service to improve the degree of disability and restore their ability to live independently. Purposes: The purpose of this study is to investigate the changes in the patient's activities of daily living (ADL), instrumental activities of daily living (IADL) and European Quality of Life -Five Dimensions (EQ-5D) after undergoing preparation for transition.

Purpose/Methods

Method: This study took those patients who were assisted by a discharge planning team of a medical center in the transition to follow-up care services. Telephone calls were made to investigate changes in ADL, IADL and EQ-5D after the patients' discharge from the hospital between July and December 2020.

Results

Results: A total of 64 cases were included in the study. The survey found that after the patients were discharged from the hospital, the average ADL score increased to 59.9 points, the average IADL score increased from 5.6 to 8.5, and the average EQ-5D score increased from 3.5 to 8.7. The analysis with generalized estimation equation (GEE) model indicated significant progress at the three time points of the patient's discharge from the hospital, the first and second telephone visits after discharge.

Poster Session 1: Governance models, culture, policy and leadership for HPH

Implement artificial joint implants to go green and upload information systems to jointly protect people's medical safety

LI Ling-May, LIN Ching-Feng, LUO Jiing-Chyuan

Introduction

Artificial joint replacement due to degenerative joints may need to be replaced again after a few years due to medical materials or surgical quality. The Health Insurance Agency promotes the registration of artificial joints, hospitals upload the height and weight of surgical cases, surgical approaches and anesthesia risk classification, and artificial joint implants. Information such as medical device barcodes for long-term follow-up of the prognosis of implants, warning of poor products, reducing patient burden, and improving medical quality.

Purpose/Methods

Perform artificial joint implant surgery, then go to the Health Insurance Department to establish a "Health Insurance Information Network Service System (VPN)" landing platform to register and upload the main surgical order code, surgery type, surgical side, height, weight, Surgical approach, anesthesia risk classification, and bar code for medical devices for artificial joint implants.

Results

According to statistics, from the first quarter to the fourth quarter of 2018, the average rate of logging and uploading artificial joint implants to the health insurance information network service system (VPN) is 97.62%. In 2019, 2020, the rate of registration and upload for two consecutive years is 100%.

Conclusions

Through the upload of artificial joint implant information, medical service agencies can query the patient's medical information in real time. The public can also query the information of artificial joints implanted in the body from the health passbook, which reduces accidents and mortality and improves the quality of medical care, and protects the safety of the public.

Contact: LIN Ching-feng

Keelung Hospital Ministry of Health and Welfare
Shin-Erh Road 268, 201 Keelung,
chingfeng01@gmail.com

Use of information system to improve the upload rate of CT and MRI examinations

LI Ling-May, LIN Ching-Feng, LUO Jiing-Chyuan

Introduction

The Health Insurance Department has set up a "Health Insurance Medical Information Cloud Inquiry System". Each medical institution uploads images regularly. As long as the doctor issues an order, he can directly access CT, MRI and other images in the clinic for nearly six months to avoid repeated inspections and radiation Dose exposure improves the safety and quality of public medical treatment.

Purpose/Methods

After the CT and MRI examinations are performed, the images are automatically uploaded to the DH within 24 hours of execution according to the format prescribed by the National Health Insurance Agency. The medical institution then checks the uploading success, and the National Health Insurance Agency regularly returns the upload ratio.

Results

According to statistics, the upload rate of CT and MRI images in 2019 is 95.66%; the upload rate of CT and MRI images in 2020 is 97.22%; the upload rate of CT and MRI images from January to February 2021 is 98.14%, and the upload rate continues to increase.

Conclusions

When physicians execute medical information cloud systems to query images, they have a more comprehensive understanding of the condition, reduce unnecessary repeated inspections across hospitals, ensure the rational use of medical resources, and improve the safety and quality of patient treatment.

Contact: LIN Ching-feng

Keelung Hospital Ministry of Health and Welfare
Shin-Erh Road 268, 201 Keelung,
chingfeng01@gmail.com

To achieve the „people-centered, whole-person healthcare“ governance with the sustainable development goals: An example of Kaohsiung Municipal Siaogang Hospital.

LEE Chia-Fang, SHEN Wen-Chun

Introduction

Kaohsiung Municipal Siaogang Hospital (KMSH) upholds the vision of providing holistic health care services, clinical education and medical technology research and to be the guardian of community health. We have a policy statement for healthy hospital, which is promoted through the Community

Development and Health Committee. The purpose is to build a more complete health care system through the organizational structure, so that the overall health care promotion can be more smoothly.

Purpose/Methods

In promoting the development of health promotion, KMSH follows the 17 Sustainable Development Goals (SDGs). We focus on six of the SDGs: Good Health and Well-being, Quality Education, Affordable and Clean Energy, Industry Innovation and Infrastructure, Sustainable Cities and Communities, and Partnerships for Goals. In addition, we set up the system to promote community healthcare, social and spiritual care and age-friendly health care. It also aims to establish a friendly and respectful medical environment to patients and their families.

Results

We earned Taiwan Corporate Sustainability Awards (TCSA) Silver Award for Corporate Excellence in hospital HSR Sustainability Plan in 2020 and the Gold Quality Award for the healthy hospital from HPA in 2021.

Conclusions

In accordance with the 17 global sustainable development goals, the hospital aims to build a "people-centered, whole-person healthcare" governance and to realize the health service capacity, in order to echo the health promotion issues advocated by WHO.

Contact: CHIA-FANG LEE

Kaohsiung Municipal Siaogang Hospital
No.4, S. Ln.,Dashu Dist.,Kaohsiung City840,Taiwan
84046 Kaohsiung, miki19890124@gmail.com

The process of regulating health promotion and gaining recognition as a first of its kind in Israel special health promoting hospital

LEVY Michal, NOAH LEVIN Ifat, SILUK Yael, MUGAMI Odelia, MEODED ARAKI Maayan, VANDER Tatiana

Introduction

The Herzfeld Geriatric-Rehabilitation Medical Center of Clalit Health Service Organization in Israel has been involved in health-promoting activities since its inception, targeting patients, staff and community. Yet, up until 2019, they were sporadic, not in line with the health-promoting hospitals standards, and not included in the hospital work plan. Building a health promotion program within the annual medical center work plan of all sectors, tailored to: staff, patients and community, to reduce health disparities, and to join the HPH network.

Purpose/Methods

In 2019, a steering committee including a multi disciplinary staff was established to lead the process. A literature review was conducted, the existing health promotion activities were mapped, needs assessment questionnaires were completed by staff including preferred areas of activity, and research and collaboration were planned. The criteria for recognition from

the HPH network were adopted. A four-year workplan for the target populations, including multi-organizational collaborations was developed.

Results

In September 2020 Herzfeld received recognition as the first HPH health-promoting rehabilitative geriatric hospital in Israel. The COVID-19 pandemic dictated a new reality; activities were postponed under the new procedures. The challenge spawned new opportunities and treatment methods such as remote therapy, targeting emotion-focused interventions. The 2021 workplan incorporates health-promoting action for all target audiences. Collaboration was established with the Clalit Dept. of Community Health Promotion for conducting workshops and lectures. Two studies were initiated: Diabetes Education for Inpatients, Mindfulness Workshop for staff.

Conclusions

A renewed awakening is being felt among the staff, catalyzing various initiatives for future projects. The trend is to focusing more on health less on illness. With Herzfeld joining the HPH network, the awakening to health promotion is permeating from the employee level to the policy level and beyond.

Contact: VANDER Tatiana

tatianavander@clalit.org.il

Implementation of health promotion with leadership, management by objectives and a cross-sectoral integration mechanism in a medical center in Taiwan

LEE Meng-Hsun, TSAI Hung-Wen, FU Yun-Ching

Introduction

To promote health care, the management team of a 1,600-bed public medical center with around 4,100 employees in Taiwan decided to implement the strategies of management by objectives and cross-sectoral integration systematically so that the medical services delivered are safe, high-quality, holistic and smart.

Purpose/Methods

A cross-sectoral "Health Promotion Committee" was set up in 2016 consisting of 6 subcommittees: the Patient Health Management Subcommittee, the Community Health Building Subcommittee, the Workplace Health Promotion Subcommittee, the Staff Welfare Promotion Subcommittee, the Geriatric and Gerontology Development Subcommittee, and the Smoke and Betel-nut Free Subcommittee, chaired by the superintendent. Management by objectives (MBO) was applied to set up work items of each subcommittee, and meetings are held every quarter to follow up the results.

Results

The management team (the superintendent, 3 deputy superintendents and the chief secretary) and 16 heads of a first-level department of this hospital fully participated in the Health Promotion Committee. In 2020, they met 4 times to evaluate the

performance of each subcommittee. Of the 118 indicators, 104 reached or exceeded the target value; the average completion rate was 88.1%. Employees who were aware of health promoting hospital policies increased from 75% in 2017 to 96.2% in 2020.

Conclusions

Through full participation and leadership of the management team, the cross-sectoral integration committee became a platform of effective communication via a management by objectives model. Through it the health promotion needs and results of the whole hospital are integrated. Starting in 2020, all employees must receive a one-hour training course, so that they can understand the hospital's determination to implement health promoting policies, and help the hospital achieve health promotion goals.

Contact: LEE Mike, Meng Hsun

Taichung Veterans General Hospital
1650, Sec. 4, Taiwan Boulevard, Xitun Dist., Taichung City
40705, Taiwan, 407219 Taichung City,
r5843001@gmail.com

Poster Session 2: Health care management systems, structures and processes to optimize health gain for patients, staff and populations served

Inter-organizational cooperation: Exploring Key Factors for Long-Term Care outside Activities

LIANG Shioh-Ching, YEN Chia-Chi, LIN Chun-Yu, HUANG Ming-Ren

Introduction

Long-term care institutions handle activities that focus on manpower and safety examinations, and rarely handle outdoor activities. The evaluation index of the Taiwan Changzhao Agency is listed as an indicator for cooperation activities with community resources. This article explores the key factors of long-term care organization outing activities, and then makes effective decisions to make the event more successful, as a reference for future event management.

Purpose/Methods

Activities are organized through cooperation between institutions to enrich the lives of residents. Satisfaction survey on residents and family members, five-point ruler, analysis with descriptive statistics. With reference to the five facets discovered by Yang (2016), a qualitative analysis of the activity history is conducted to explore the key factors for the success of the activity.

Results

There are 18 residents and family members, and 33 working teams. Eighteen valid questionnaires were collected. After statistical analysis, it was found that the satisfaction rate was as

high as 4.78, and the satisfaction rate for staff services was the highest. Perform qualitative analysis from site exploration, inter-agency communication meetings, team meetings, volunteer communication meetings and other activities. The findings are that event selection, event management, enlisting community support, inter-agency collaboration and funding are key factors.

Conclusions

High satisfaction indicates that for residents of long-term care institutions, outings are attractive and demanding. The qualitative analysis shows that in the face of disabled residents, it is necessary to invest in high manpower when going out, especially with volunteer support. Furthermore, inter-agency cooperation, from the perspective of event management, controlling the cooperation mechanism is the key factor for the success of the event.

Contact:

allamia@mail2000.com.tw

The effect of an integrated ambulatory care program on the healthcare utilization of patients with multi-morbidity and polypharmacy

LO Yu-Tai, CHEN Jung, CHEN Pin-Hao, LEE Wei, LU Feng-Hwa, YANG: Yi-Ching

Introduction

Patients with multiple chronic diseases (multimorbidity) receive fragmented care and have a poor quality of life, increased healthcare use, and higher mortality. Polypharmacy and the high frequency of outpatient clinic visits remain serious problems in Taiwan in which health care resources are consumed in return for no improvement in outcomes. This study aimed to examine the effect of an integrated ambulatory care program on the health care utilization of patients with multimorbidity and polypharmacy.

Purpose/Methods

We conducted a retrospective, one-group pretest-posttest control study on patients who were defined as multimorbidity and participated in the integrated ambulatory care program between July 1, and September 30, 2019, at an 1193-bed university hospital. Medical records of the participants were reviewed to determine demographic characteristics, comorbid conditions, medications, healthcare utilization, and medical expenditures. Healthcare use and medication-related outcomes were compared one year before and after the integrated ambulatory care program.

Results

The mean age of the participants (n=134) at baseline was 74.41 ± 9.75 years, and 73 (54.48%) were women. At one year follow-up, all participants showed significant reductions in the annual number of outpatient clinic visits (p<0.001), emergency department visits (p=0.029), chronic prescription medications (p<0.001), and potential inappropriate prescription (p=0.002) for patients age ≥ 65 years. However, no effect was found on

reducing the annual number of hospitalization, length of hospital stay, and overall healthcare expenditures.

Conclusions

A three-time services integrated ambulatory care program consisted of multidisciplinary teamwork, comprehensive assessment, case management, and whole regimen medication review was likely to reduce the frequency of outpatient clinic visits, emergency department visits, the number of chronic drugs, and potentially inappropriate medication prescribed among patients with multimorbidity and polypharmacy.

Contact: LO Yu Tai

National Cheng Kung University Hospital
70403 Tainan, loyutai@outlook.com

Preliminary Study on the Complexity of Hospital Discharge Preparation

WANG Ling-Hsiang, HUANG Yi-Ling

Introduction

Taiwan has started a long-term care pilot program since 1993. However, with the impact of an aging society, and declining birthrates, the plan to help patients return home has been inadequate.

Purpose/Methods

This study used descriptive statistical methods to compile data on patients admitted to the Show Chwan Memorial Hospital for surgical treatment from 2017 to 2018, and sorted out cases requiring social workers' services. We analyzed the percentage of people with difficulty in social resources on those who are able to afford caregivers after discharge. We also tried to explain the difficulties faced in preparing for discharge and further proposed coping strategies.

Results

In 2017, 104 patients who needed surgical treatment received social work services. The percentage of patients who could not be discharged on schedule was 7.6%. In 2018, 107 surgical patients required social worker intervention. Among them, 12 patients were unable to be discharged on schedule due to the predicament of discharge. According to statistics, those who are facing discharge difficulties are: no kinship assistance, lost their jobs and self-care ability, discharged from hospital due to administrative delay of the public sector, and being homeless.

Conclusions

According to the statistics of our hospital, although there are assistance in preparation for discharge and long-term care plan, there is an increasing trend in those who do not meet the welfare requirements and need civil society resource, which indicates that changes in demographic structure have caused more complicated social problems. Requires the development of diversified social welfare services to solve the increasingly complex problem of discharge preparation.

Comments

This study shows an increase in delays in hospital discharge preparation, showing that in addition to the problem of disease treatment, in order to help patients be discharged, it is also necessary to work with patient families and the community.

Contact: CHIA WEN Lai

Show Chwan Memorial Hospital
CHANGHUA, chd7203270@hotmail.com

Reducing Occurrence of Medical Device-Related Pressure Injury Incidence in the Intensive Care Unit

LIU Ya-Min, LI Yueh-Hua, TSAI Pei-Chen, Hsieh Yu-Ho, HUAI Xuan-Huang, LEE Ming-Tsung

Introduction

Medical device-related pressure injury (MDRPI) occurs in hospitalized patients, especially in adult intensive care units. In addition, medical devices must be securely fixed and non-removable. This increased the difficulty in preventive measures and care of clinical MDRPI. Therefore, how to prevent is an important issue in intensive care. The purpose of this study was to provide preventive measures (include: lecture, Interactive response system and situated simulation) and using care bundles in order to decrease the incidence of MDRPI in intensive care units from 0.9% to 0.5% or less in a teaching hospital in central Taiwan. To reach these goals, we arranged multiple educational programs to educate the intensive care staffs with care bundles.

Purpose/Methods

NPUP announced in 2017 that "CCRAEBC" can be used to prevent MDRPI, including to choose the correct size of medical equipment; apply on high-risk areas such as the bridge of the nose to cushion pressure and use of the thin hydrocolloids to protect the skin; for removable devices or removable materials, at least daily assessment of skin condition; avoid placing medical equipment on a past or existing pressure injury location; educate intensive care staffs on proper use of equipment and prevention of skin breakdown; observe possible edema under devices and delay healing; confirm that the medical devices are not directly under the bed or the body of the patient who is immobile.

Results

Results showed that, after educated the intensive care staffs and applied care bundles, the incidence of MDRPI reduced from 0.9% in January 2019 to 0.3% in December 2020.

Conclusions

MDRPI can be seen has gradually drawn attention, so it is recommended to provide staff with continuous specialist education to build their awareness and care knowledge, while incorporating pressure injury quality control indicators for continuous monitoring. It is recommended to use these bundle care concepts effectively in every patients in the hope of providing better health care quality.

Comments

The medical device related pressure injury in addition to causing pain it also increases medical expenses. Therefore, early preventive measures through combined care can effectively prevent.

Contact: CHIA WEN Lai

Show Chwan Memorial Hospital
CHANGHUA, chd7203270@hotmail.com

Reducing Occurrence of Catheter-Associated Urinary Tract Infection in Intensive Care Unit

LIU Ya-Min, LI Yueh-Hua, TSAI Pei-Chen, HSIEH Yu-Ho, HUANG Huai-Xuan, LEE Ming-Tsung

Introduction

Urinary tract infection is one of the most common infections in healthcare-associated infection (HAI). Most catheter-associated urinary tract infections (CAUTI) are related to indwelling catheters. About 40% of cases of urinary tract infections are related to catheter indwelling. According to statistics, about 28% of in-patient catheter is unnecessary. Therefore, this motivated to explore the factors related to CAUTI, in order to ensure the correctness and consistency of care bundles, reduce related CAUTI, and hope to improve the quality of patient safety and reduce medical costs.

Purpose/Methods

Strategies to reduce CAUTI: (1) Education and training, all medical staff must understand relevant infection control measures and policies, including indications for catheter use, timing of removal of catheter, and care of catheter; (2) The concept of care bundles is used to prevent CAUTI. The key points of care include: 1. Before the catheter is placed, the indication must be evaluated to reduce unnecessary placement of the catheter; 2. Aseptic technique is performed and the catheter is properly fixed when the catheter is placed; 3. After placement of the catheter, urinary catheter care is required every day; 4. Daily removal assessment.

Results

The research subjects were the nursing staff of intensive care unit in a teaching hospital in central Taiwan. After the implementation of the measures, including the education of the relevant concept of "CAUTI care bundles" and the implementation of the bundle care, the accuracy rate increased from only 74.6% in pre-test to the average of 95.3% in post-test. Research results showed that the incidence density decreased from 1.5 % to 1.1 % from January 2020 to July 2020.

Conclusions

The most effective way to reduce the occurrence of catheter-related urinary tract infections is to avoid unnecessary catheter placement and early removal of the catheter.

Comments

There are many ways to prevent catheter-related urinary tract infections, and it is important to choose an effective and implementable method.

Contact: CHIA WEN Lai

Show Chwan Memorial Hospital
CHANGHUA, chd7203270@hotmail.com

The effect of integrative model of health promotion in hospitals on health service quality in Taiwan: evidence from a longitudinal panel study

LEE Chiachi, WANG Ying-Wei, CHIA Shu-Li, CHEN Michael S., HUANG Hui-Ting, WANG Mei-Hsiu

Introduction

Taiwan's Health Promotion Administration (HPA) has successively instituted a series of health promotion certifications in hospitals to enhance health promotion in hospitals; examples include the HPH in 2007, environment-friendly healthcare in 2010, age-friendly healthcare, and smoke-free healthcare in 2011. The HPA launched an integrative certification initiative (iHPH) in 2016 to streamline a plural system of certifications of health promotion in hospitals.

Purpose/Methods

This study aimed to examine effects of the integrative model of health promotion in hospitals on quality indicators in Taiwan. We used panel data for the 184 hospitals that received iHPH certification during 2017 and 2018 and data were extracted from surveillance information systems from 2015 to 2019 for a pre-post intervention study. We analyzed data by using linear regression and negative binomial Poisson and generalized estimating equations to account for clustering.

Results

Regional and district hospitals had higher registry rates for betel nuts and cigarette; and higher rates of being on the diabetes pay-for-performance program, higher rates of bA1c tests, fasting lipid profile, ophthalmoscopic examination, and urinary protein excretion test, utilization rates of adult preventive health services, and screening rates of pap smear, mammography and stool occult blood after iHPH than before iHPH. Previous HPH experiences led to higher rates of some quality indicators. Previous smoking-free certifications brought positive effect on success rates and follow-up rates of smoking cessation.

Conclusions

The HPH approach could contribute to health service quality.

Contact: LEE Chiachi Bonnie

China Medical University
No.91, Hsueh-Shih Road, 40402 Taichung,
bonnie1012@mail2000.com.tw

Use of HFMEA (Healthcare Failure Mode and Effect Analysis) Strategy to Improve Surgical Teams' Fire Prevention Awareness Rate

HUANG Yun-Fang, TSENG Cheng-Chun, LI Chia-Ling

Introduction

In recent years, fire accidents have frequently occurred to hospitals. In 2018, the fire accident at Ministry of Health and Welfare Taipei Hospital caused 15 deaths and 37 injuries. At our unit, in August 2020, one of the colleagues created thick smoke when using microwave oven. In October of the same year, there was white smoke from the autoclave and sparks from the operating bench wires. During the cardiac surgery in the operating room in November, due to the use of multiple large medical instruments at the same time, the power tripped in the room. Although it did not cause casualties, it has shown that in hospital fire safety prevention, the concept of disaster prevention of healthcare personnel should be improved. The purpose of the plan is to improve the awareness rate of fire prevention of surgical teams.

Purpose/Methods

This study used the concept of Healthcare Failure Mode and Effects Analysis (HFMEA) to develop a questionnaire on surgical teams' fire prevention awareness. The surgical teams (surgeons, nursing personnel and service personnel) were invited to complete the questionnaires anonymously. A total of 211 subjects were enrolled, with a valid questionnaire return rate of 89%.

Results

This study interfered with the formulation of the standard emergency disaster response process, held emergency disaster drill courses, and added the unit's daily fire source and high-power equipment checklists in the operating room. Besides, this study invited Australian fire emergency response scholars and medical policy scholars to the inspect the unit and offer suggestions and improvements. This study also coordinated with the Public Works Division to mark the maximum flow meter of the power socket in the operating room and installed the microwave infrared personnel sensor in the unit. The surgical team's awareness rate of fire prevention increased from 58% to 90%.

Conclusions

It is necessary to improve the fire response awareness and ability of the surgical teams to provide a safe working environment and maintain the safety of surgical patients.

Contact: LI Chia-Ling

Hsinchu Mackay Memorial Hospital
No.554, Nanda Rd.
Hsinchu, applel32370@gmail.com

National Patient Satisfaction Assessment

KAVKOVA Blanka, STEJSKALOVÁ Veronika

Introduction

Monitoring of patient satisfaction is a legal obligation of every inpatient healthcare provider in Czech Republic, but to date, this indicator of the quality and safety of healthcare has been provided in many different ways. Very often by commercial entities present an annual financial burden for medical facilities. A secondary problem of the current system is its inconsistency in the distribution, collection and evaluation of questionnaires, which limits the usability of the collected data to some extent.

Purpose/Methods

Therefore, in 2020, the Ministry of Health started the pilot project National Patient Satisfaction Assessment. The main goal of this project is to set up a unified national system for monitoring and evaluating patient satisfaction in the Czech Republic. In this way, the Ministry of Health will be able to collect comparable data and, thus, in cooperation with the Institute of Health Information and Statistics of the Czech Republic, to provide healthcare providers with detailed analysis.

Results

In 2020, a pilot project was implemented. 13 medical facilities providing inpatient care applied. However, due to the epidemiological crisis of COVID-19 and the state of emergency in the Czech Republic, only 5 healthcare facilities completed the project. The others had to resign. In October 2021, the first official year of the project will be launched with the expected significant increase in the number of participants.

Conclusions

The main tool of the project is the national methodology, a unified questionnaire and a web application. The project is half digitized and in its sharp operation offers healthcare facilities in the Czech Republic the opportunity to monitor patient satisfaction without financial burden, under the auspices of the Ministry of Health and at the level of national evaluation.

Contact: STEJSKALOVA Veronika

Ministry of Health
Palackého náměstí 4, 128 01 Prague,
veronika.ste@seznam.cz

Making a Strategy to Reduce the Writing Error Rate of the Mental and Physical Handicap Handbook in a University-Affiliated Teaching Hospital in Taiwan

TSENG Mei-Ting, LO Chia-Lun

Introduction

The health policy in Taiwan for mental and physical handicap assessment was promulgated since 2009 based on the international classification of functioning, disability, and health.

The major errors made by the medical professionals coming up from three ends: the physicians, the nursing staffs and the executive system which might result in slowing down of the administrative efficiency and compromising the quality of medical service. Thus we performed a in hospital survey trying to find out and reduce the writing error rate during the procedure.

Purpose/Methods

We retrospectively collected the handbooks of mental and physical health assessment in the department of neurology of an university-affiliated teaching hospital in southern Taiwan. The writing errors were checked and marked by a professional registered nurse who had been working in the department for 15 years with a good experience in these affairs. Afterwards, we set up an interventional strategy for 8 weeks in terms of making a example handbook, organizing a consultation board, holding a team meeting to encourage face-to-face communication, and establishing a manual checking up system. Descriptive analysis was used for comparing rate of error before and after the strategy.

Results

Totally 469 handbooks were collected via purposive sampling between July and December 2020 for six-month time, dividing into three phases: pre-treatment phase (July to August 2020), early treatment phase (September to October 2020) and late treatment phase (November to December 2020) with a interval of 8 weeks for each phase. Among 469 documents, 66 contained writing errors with an averaged writing error rate of 14.07%. The error rate decreased from 19.27% in July, 16.66% in August, 9.09% in September, 10.25% in October, 16.66% in November to 12.34% in December 2020.

Conclusions

In summary, our findings support that health policy based on a systematized and interactive strategy in a university-affiliated hospital can reduce the writing error rate made by medical staffs.

Contact: TSENG Mei-Ting

Kaohsiung Medical University Chung-Ho Memorial Hospital
No.100, Tzyou 1st Rd., Sanmin Dist., Kaohsiung City 80756,
Taiwan (R.O.C.), 807 Kaohsiung,
940034@kmu.org.tw

Apply multiple strategies to the hand hygiene plan of psychiatric patients

CHEN Chin-Ling

Introduction

Chronic psychiatric patients live in groups, share facilities, have close contact with daily life, and have many opportunities to receive group treatments. Patients have dysfunction or deterioration due to disease factors, and their personal hygiene is often sloppy. They have differences in understanding and cognitive abilities, and are not in control of execution. The Ministry of Health is not sure and cannot actively express or request assistance. Infections in medical care will be caused by contaminated hands, the spread of infectious bacteria, cross-contamination of the environment and spread, which will lead to long hospital stays, high medical costs and high mortality. Studies have pointed out that the preventive medical care infection strategy is: wash your hands frequently and put them in the daily routine. It is the simplest, effective and most cost-effective

measure to reduce the spread of pathogenic bacteria in medical institutions.

Purpose/Methods

1. Multi-game teaching strategy course-improve learning motivation and self-worth affirmation. 2. Set the reminder voice to report the clock and draw the schedule of work and rest-concrete environmental treatment. 3. Use singing faucets-cross-field cooperation, combine different professional fields, discuss issues together, and increase research and development efficiency. 4. Establish a hand-guarded star officer-establish an audit system. 5. Making teaching materials-multi-sensory learning with audio-visual animation.

Results

1. Game learning brings life skills into the regularity of patients' lives and improves the quality of self-care 2. Establish a lively and vivid learning environment centered on patients, and apply healthy behaviors in daily life. 3. The family members affirmed the patient's regular behavior and hand hygiene certification certificate after returning home. 4. The incidence of infection density decreased and the effect was maintained.

Conclusions

Mental rehabilitation care uses group guidance and social skills training, through clear training goals, planned activity participation, repetitive practice, role playing, enhancement and modification of behavior. Using the concept of classroom game learning, the curriculum of multiple teaching strategies-professional knowledge is integrated into the game, and the flexible application of storytelling, competition and interactivity, etc., enhance motivation and correct cognitive feedback performance in the process, making it easier to achieve the goal.

Contact: CHEN CHIN LING

National Taiwan University Hospital Yunlin Branch
No. 38, Xixi, 632 Huwei Township,
chenchinlingy00560@gmail.com

Gender, traditional Chinese body constitution, and vertigo risk assessment

WU Te-Fang, CHEN Jin-Shuen, TANG Pei-Ling

Introduction

Vertigo causes inconveniences in daily lives and can impact daily work. Vertigo is recurrent, and its prevalence—which is approximately two to three times higher in women than in men—increases with age. Traditional Chinese medicine (TCM) suggests that vertigo results from poor nutrition in the upper orifices. This study examined the impact of sex differences in TCM body constitution on vertigo, which can be used to develop vertigo prevention strategies.

Purpose/Methods

A total of 2,760 participants were evaluated from the data from the Taiwan Biobank surveyed between 2012–2017. The research data included sociodemographic characteristics, triple-high diseases, lifestyle, and TCM body constitution. The “TCM body constitution scale”, developed by a TCM constitution and

syndrome research team in Taiwan, contains 44 items and comprises a combination of three body constitutions: yang deficiency, yin deficiency, and phlegm stasis, i.e., unbalanced constitutions. Multivariate regression analysis was performed to determine sex differences in TCM and vertigo using the Model approach.

Results

Model 1 shows that women with unbalanced constitutions were prone to vertigo (Adjust odds ratio [AOR]: 1.839; 95% Confidence interval [CI]: 1.275–2.654). After adjusting for other risk factors (including sociodemographic characteristics, three diseases, and lifestyle), unbalanced body constitutions were shown to have a strong correlation with vertigo in women, reaching a significant level (AOR: 2.069; 95% CI: 1.407–3.041); whereas no significant differences were found in men.

Conclusions

Vertigo can occur differently based on gender and age based on body constitution. Interestingly, we found that TCM body constitution remained an important factor affecting vertigo in female patients, regardless of controls over sociodemographic characteristics, history of chronic disease, and lifestyle. Women with unbalanced body constitutions were 2.069 times more likely to suffer from vertigo, whereas men were not affected.

Contact: WU Te-Fang

Kaohsiung Veterans General Hospital
No. 386, Dazhong 1st Rd., Zuoying Dist., Kaohsiung City 81346,
Taiwan, 81346 Kaohsiung City,
tfwu@vghks.gov.tw

Intelligent Medicine—Intelligence nursing enhances the quality of care

TAI Jui-Fen, LU Zi-Yin

Introduction

The global-known CA magazine (Impact factor: 244,585) had released the latest statistical report suggesting that the incidence all over the world is rapidly growing, which the reasons are very complicated. The report not only shows the ageing and the growing population, but the major risk factor and the changing distribution of the cancer. This research expects to rapidly assess the need of the patients with cancer by applying the nursing information system, which aims not only at the treatment of the diseases, but also at utilizing the comprehensive concepts from patients to the whole family, creating a fast and completely comprehensive assessment covering the physical, mental and spiritual, social, and family level.

Purpose/Methods

Creatively designed by the cancer caring team, the nursing assessment information system was developed and built based on the Palliative/Patient Outcome Scale (POS), the system could actively provide the suggested process and caring mode according to various assessed points from the patients. The whole process contains normal caring, automatic communication with related team, the referral conditions of the palliative medicine and the referral process, etc., all of the above is to quickly provide the treatment suggestion to the related

practitioners, so this system could combine the assessment, treatment and value while completing the nursing record at the same time. It can enable the first-line health care worker to immediately solve the patients' problems with the team recourses and uplift the precise caring quality for the patient.

Results

(1) The nursing information system had successfully developed on May, 2018. After 2 months of testing, it had been clinically applied on July, 2018, with the operation in 2 wards going very well during the probation in 2018. In 2019, it had been applied into 4 wards, and it will be implemented throughout in 2020. (2) The biggest problem discovered of the patients from June of 2018 to June of 2019 is "The wasted time in the treatment", which accounts for a quarter of the patients number, and then is "the worry and anxious of the family and friends". When it comes to the number of the intervention from the related referral team, which in order, are: 62 patients turned over to social workers, 61 patients to neoplasm case managers and 33 to neoplasm psychologists. Lastly, 20 patients are turn over to psychiatrists due to being anxious, in depression and being worrisome.

Conclusions

The application of the nursing system was known to assist the practitioners precisely assess the caring needs of the patients formerly as well as clarify and understand patient's and the family's question and doubts, solving patient's body and mental discomfort, which can closely meet the clinical caring needs. In 2019, our hospital was honored by the judges in the General Cancer Certification Program with the built of the system and it was suggested to apply for patent to progressively promote the using.

Contact: TAI JUI-FEN

Kaohsiung Veterans General Hospital
Li-Chu Wu, No.386, Ta-Chung 1st Rd., Kaohsiung City
813, Taiwan (R.O.C), Kaohsiung, iftai@vghks.gov.tw

The Study of Relationship among Experiential Marketing, Experiential Value and Royalty in Health Examination Centers

CHEN Shu-Lin

Introduction

The environment of the health care industry resulting in a considerable change in recent years by the NHI system uncertainty, rising health care costs, intra-industry competition, the rise of consumer awareness, as well as the patient's requirements to improve the quality of medical care and other factors impact. Many domestic and foreign literature shows that use of customer relationship management effectively can improve service quality. Therefore, how to use customer relationship management to enhance service quality of health check, to explore new customers and strengthen the competitiveness is an important issue.

Purpose/Methods

This research conducted a cross-sectional survey of 603 customers in the health examination institution of the medical center. Data were collected from customers who accept self-paid

health examination, using a structured questionnaire. Customers rated their feelings on a self-reported questionnaire after the health examination. The survey was conducted during January 1 to October 31 in 2020.

Results

Most respondents had positive feelings of all types of experiences and experiential value toward the health examination institution. The affective experience was scored highest among all the experiences and the service excellence value had highest score among three types of experiential value.

Conclusions

The study finding indicate that if the hospital proprietor strengthen marketing strategy (improve the quality of environmental facilities), the personnel's passion of service, and more service of health management (follow-up outpatient of medical matters, establish health databases), can enhance customer satisfaction and loyalty.

Contact: SHU-LING Chen

Kaohsiung Municipal United Hospital (ROC)
No.976, Jhonghua 1st Rd., Gushan Dist., Kaohsiung City 80457
80457 Kaohsiung City , Taiwan (R.O.C.),
juno3180@gmail.com

Increasing the Complete Rates of Clinical Care

WU Hsin-Ju, SIAO Fei Siou, HUANG Pao-Hua

Introduction

The peripheral intravenous catheter-related (PIC) infection rates increased in our unit. The catheter-related bloodstream infection is associated with the patients' poor mortality rates and delay in discharge from the hospital

Purpose/Methods

The root-cause analysis was conducted then we found that the average rates of completing care standard of PIC was 86%. According to the collecting the data ,Five improvement strategies were implemented:in-service education with inviting multidisciplinary professionals、 emphasis on the importance of the procedure for standard PIC at daily morning meeting、 examinations of clinical skills for providing standard care of PIC 、 checking the expire date and amount of disinfection fluid every day、 developing slogan for remembering standard.

Results

The average rates of completing care standard of PIC increase from 86% to 94.1%.

Conclusions

The interventions developed in this project can be applied to improve catheter-related bloodstream infection rates, which could reduce healthcare costs and enhance the patients' safety.

Contact: WU HSIN JU

Nation Taiwan University Hospital
3F.-2, No. 634-9,Jingping Rd.,Zhonghe Dist., New Taipei City
23559 , Taiwan, 23559 New Taipei City,
020351@ntuh.gov.tw

Regional Hospital Promoting Community Health to Set Up Medical Referral System for Local Clinic Friendly in Taiwan

CHEN Kuan-Hung, CHEN Anthony

Introduction

In recently, medical referral system is the most important of National Health Insurance Administration policy. Especially medical center and regional hospital all will be aggressive to set up referral system for mild diseases patient to near community hospital or local clinic. Therefore, Hospital must establish a friendly referral system through information, mobile network.

Purpose/Methods

For health promotion and prevention in primary health services, hospital will send mobile message to local clinic automatically after the patient referral from them. If we catch referral patient from local clinic, the hospital system will remind doctor must refer back to clinic at outpatient after patient went to hospital. We also provide hospital referral patient QR-code for local clinic to inquire patient data easily.

Results

Since 2019, our hospital refer to 6,696 patients to local clinic , at the same time, refer from local clinic to hospital 7,670 patients. It means two-way referral model was succeed, also friendly for local clinic.

Conclusions

In a word, we heartfelt promote referral policy could be friendly, easily for local clinic. We know promoting levels of medical care is needed in Taiwan , If we implement levels of care and referral system policy , it may reduce medical resources utilization.

Contact: LEE Pei Hsuan

DITMANSON MEDICAL FOUNDATION CHIA-YI CHRISTIAN HOSPITAL, No.539,Zhongxiao Rd.,East Dist.,Chiayi City 60002,Taiwan(R.O.C), 60002 Chiayi City,
cych13199@gmail.com

Reduce nursing calling the hospital porters to improve nursing quality

LI Mei-Fang, LI Siao-Ci

Introduction

It takes time for the nursing staff to call the function room continuously and the hospital porters, which causes the waiting time for transferring patients to be too long or the medical records are left in the examination function room due to poor communication, which affects the efficiency of the nursing staff.

Purpose/Methods

By making phone number card and placing medical records, it is convenient for the staff in the function room to notify the hospital porters, and to educate the staff on how to use the

phone number card, and to count the results before and after the implementation.

Results

A total of 532 calls were made to the function rooms and nursing posts in the month prior to the implementation of the statistics, and the number of post-implementation items was reduced to 138, which significantly reduced the unnecessary waste of time for nursing staff, thereby increasing the time and quality of care. Nursing staff satisfaction increased from 43.5% to 93.2%.

Conclusions

The use of telephone number card and education and training interventions to make relevant staff aware and reach consensus can effectively improve the number of times that nursing staff take calls at work, which can further improve the nursing quality and reduce their work pressure.

Comments

Nursing staff interrupts nursing treatment by receiving and transferring calls during the care of the patient, which leads to accidents. It is recommended to identify problems and improve them to reduce the frequency of answering calls by nursing staff so that nursing staff can focus on patient care to reduce accidents.

Contact: HSU Jason

Chang Bing Show Chwan Memorial Hospital
No.6, Lugong Rd., Lugang Township
Changhua, showchd@gmail.com

A hospital in northern Taiwan recorded the history of drug allergy to patients and avoided re-use of allergy drugs, sharing results

JAO Yi-Ching, LIN Ching-Feng, LUO Jiing-Chyuan, LI Ling-May

Introduction

Angioedema is a type of swelling (edema) of the skin and submucosa of the underlying skin and tissues (edema), which may occur on the face, tongue, throat, abdomen, or arms and legs. The most common symptoms occur after exposure to substances that trigger allergic reactions, such as food, drugs, cosmetics, or insect bites. Common drugs such as antibiotics (like penicillin), NSAIDs, diuretics and aspirin.

Purpose/Methods

At the end of 2016, our hospital began to target emergency patients and asked about medication allergies during Triage. And set the results in the hospital's medical computer system, in order to reduce the chance of doctors in our hospital prescribing allergic drugs to patients in the future.

Results

According to statistical analysis of the number of ADR notifications from 2017 to 2020, although the overall number of notifications has not decreased significantly, the rate of angioedema caused by NSAIDs or antibiotics in Type B adverse reactions has a gradually decreasing trend. In 2017, the ratio of

NSAIDs or antibiotics divided by Type B ADR was 19.04%, in 2018 it was 15.55%, in 2019 it was 16.92%, and in 2020 it was 9.67%.

Conclusions

According to this statistical analysis, it can be known that setting allergy medicines in advance can enable doctors to avoid the patient's previous medication allergy history when prescribing medications, reduce the chance that patients will be allergic to the same medicine again, reduce medical waste, and increase patient medication safety.

Contact: LIN Ching-feng

Keelung Hospital Ministry of Health and Welfare
Shin-Erh Road 268, 201 Keelung,
chingfeng01@gmail.com

Using NHI-pharma Cloud Data combined with Pharmacist consultations to improve the safety of in-patients in the acute psychiatric ward - Taking One Northern General Hospital as an Example

CHANG Hsu-Chaio, LIEN Kai-Hung, WU Wei-Hsin, LIN Ching-Feng, LUO Jiing-Chyuan, LI Ling-May

Introduction

In 2017, a bipolar disorder patient of severe adverse drug reactions caused by drug interactions after the use of lithium and antihypertensive drugs. Measures to explore the safety of interdisciplinary multi-drug use in mental patients is worthy of attention and then design a pharmacy consultation mechanism to integrate cross-domain care. The model in the evaluation of the patient's clinical medication and provides integrated pharmacological care to enhance the medication safety.

Purpose/Methods

For newly admitted patients in the acute psychiatric ward of our hospital from April 2018 to December 2020, use the Health Insurance Cloud Pharmacy Calendar to query patients' out-of-hospital medications, and integrate the current medications. Ask the pharmacist for evaluation in a pharmacological consultation and reply to the results. The physician evaluates the patient's overall medication status.

Results

A total of 589 patients were evaluated, Medical disease: 83 (14.1%) with diabetes, 60 (10.2%) with hypertension and 18 (3.1%) with hyperlipidemia. A total of 528 medications of the pharmacist recommended, including 348 drug interaction (65.9%), 139 monitoring values of recommended (26.3%). A total of 309 (58.5%) of the clinicians received medication recommendations. The reasons for not accepting the medication suggestion are that the patient has severe symptoms and needed special medication (88) and the patient had no significant side effects and continues to be observed (126).

Conclusions

It is not uncommon for patients with acute psychosis to use multiple medicines across disciplines. Doctors accept pharmacists' recommendations to adjust medications or adjust treatment rates by nearly 60%. After the undergraduate started this pharmacy consultation mechanism, in-patients have not experienced serious adverse drug reactions in the past three years. It is obvious that the combination of the health insurance cloud medicine calendar and the pharmacist consultation mechanism is indeed helpful to ensure the safety of patients' medication.

Contact: LIN Ching-feng

Keelung Hospital Ministry of Health and Welfare
Shin-Erh Road 268, 201 Keelung,
chingfeng01@gmail.com

Establishment of Standard Operating Procedures for unexpectedly undetectable HbA1C in Diabetes Patient

TU Chi-Chao, LEE Pei-Ning, WU Meng-Ting, WANG Wen-Yao, WU Tung-Huan, HUANG Liang-Sheng, LIN Ching-Feng, LUO Jiing-Chyuan, LI Ling-May

Introduction

Glycated hemoglobin is a crucial indicator for diagnosis of diabetes and monitor of blood glucose level over a period. A change of red blood cell lifespan or a variant of hemoglobin has negative impact on glycated hemoglobin analysis. Thus, reviewing reports carefully and management of test results are necessary for laboratory to offer accurate test values and clinical decision-making.

Purpose/Methods

A 62-year-old woman consulted doctor for hypertension on October 30, 2019. The physician requested tests that the fasting blood glucose was 127 mg/dl (slightly higher than normal) and the glycated hemoglobin (Arkary HA-8180V, HPLC) was undetectable. With reviewing her past laboratory data, her laboratory data showed that fasting blood glucose was 121 mg/dl in January 2012, Mean corpuscular volume (MCV) was 60.5 fl. Importantly, the test methodology was suspiciously interfered with an existence of hemoglobin variants.

Results

To report accurate test results, we established 3 solutions as interferences failed methodology (1) analyzing sample with alternative methodology, (2) performing glycated albumin test, (3) being confirmed with hemoglobin electrophoresis. (1)Using the second method(PockChem A1c, Boronate Fluorescent Quenching Technology): low value(cannot be detected); (2) glycated albumin was 16% (biological reference interval: 11-16%) ; (3) Hemoglobin electrophoresis results was HbA: 3.7% (95.1-98%); HbF: 5.3% (0-1.5%); HbE / A2: 91%, diagnosed as HbE/Beta variant. Results provided visiting doctor an accurate clinical decision-making.

Conclusions

This is a case of HbE/ β variant. The incidence of HbE gene mutations is most common in Southeast Asia and Sri Lanka. The population structure and genes have changed due to rapid increase in a large immigrant population to Taiwan. When the laboratory found abnormal testing values, it is necessary to perform analysis with alternative methodology and contact with clinical physicians to provide accurate report for treatment.

Contact: LIN Ching-feng

Keelung Hospital Ministry of Health and Welfare
Shin-Erh Road 268, 201 Keelung,
chingfeng01@gmail.com

Laboratory Critical Values in Patients with Hyperkalemia: Automated Notification and Internal Audit Support Effective Clinical Decision

LAI Chih-Cheng, HUANG Xin-Yi, WANG Su-Ning, WANG Wen-Yao, LEE Pei-Ning, TU Chi-Chao, LIN Ching-Feng, LUO Jiing-Chyuan, LI Ling-May

Introduction

Hyperkalemia can result in life-threatening cardiac arrhythmias and is associated with mortality risk. Patients who have an advanced stage of chronic kidney disease are at higher risk for hyperkalemia. The critical value (CV) of laboratory reporting is increasingly recognized as a key issue in ensuring patient care and minimizing harm. In our study, we improved the CV reporting and setup an internal audit management mechanism in 2018 to evaluate the effectiveness of CV automated notification in the patient's outcomes.

Purpose/Methods

The serum potassium critical value notification is set at <2.5 mmol/L and >6.0 mmol/L. The information system is setup to meet the notification and automatically send SMS, following by a paper notice to clinicians, and the clinical end will reply the process and results. Secondly, the audit results are reported in the monthly meeting. We describe the approach of clinicians, and their decision making following CV reporting.

Results

We retrospectively audited the data from 2017 to 2019. The number of CV notifications is 98, 109 and 91 cases, respectively. Less than three times for 127 patients (91.37%) and more than 4 times for 12 patients (8.63%) in 2017 to 2018. In 2019, less than three times for 56 patients (93.33%) and more than 4 times for 4 patients (6.67%). After improving the management mechanism, CV notification led to a change of treatment in clinicians about 55% ($P < 0.05$).

Conclusions

The laboratory plays a key role in ensuring patient safety, especially in CV reporting and an internal audit management mechanism. An evaluation should be made of the patient's outcome and clinical decision making in order to assess the effectiveness of the CV process.

Contact: LIN Ching-feng

Keelung Hospital Ministry of Health and Welfare
Shin-Erh Road 268, 201 Keelung,
chingfeng01@gmail.com

Improvement of the on-time rate of discharge

WU Mei-Chuan, LAI Li-Na, CHEN Yu-Hsuan, WU Ming-Chun, CHEN Mao-Wen, HSIAO Feng-Chi, CHIANG Chia-Ling

Introduction

Patients often complaining for improvement is long waiting time before admission. Two surveys in 2019, "waiting too long before admission" was taken as the most unsatisfactory item for inpatients. Satisfaction rate is 75.4%. The average waiting time of admission in 2019 was 131 minutes. Statistics showed the on-time rate of discharge at 10:30 was 34.1% in 2019. Long waiting times not only affected the quality of services, but also wasted medical costs. Therefore, an improvement team was formed to improve.

Purpose/Methods

Improvement period is October 1, to December 31, 2019. Improvement strategy: 1. The discharge process was advanced to the day before discharge: MBD was pre-ordered by the attending physician; the pharmacist issued the medicine; secretary pre-checked out; and nursing staff did discharge education. 2. Discharge and cleaning of beds QR code was designed. Call for the next patient to be admitted after clearing the bed. 3. Place the checkpoints of the discharge process on the electronic whiteboard, and the manager controls the time of each process.

Results

Between January 1 to June 31, 2020, the on-time rate of discharge at 10:30 increased from 34.1% to 76.3%. The average waiting time of admission decreased from 131 minutes to an average of 56 minutes. The satisfaction survey showed that "waiting too long before admission" dropped from the least satisfied to the eleventh item.

Conclusions

The on-time rate of discharge was 34.1% in 2019. By team work, discharge SOP and information platform through electronic whiteboard were established. The time of the 6 checkpoints of the discharge process were monitored. This resulted in an increase in the on-time rate of discharge by 72.2% and a reduction in average waiting time to admission by 75 minutes, which indicates the improvements to be effective.

Comments

The electronic whiteboard was introduced into the discharge process, combined with computerized technology, to provide an information platform to monitor the progress. Let the team know the progress at a glance, it will be more effective for managers to achieve the improvement goal.

Contact: HSU Jason

Chang Bing Show Chwan Memorial Hospital
showchd@gmail.com

Improving the patient satisfaction level for travel medicine outpatient clinic: experience from a medical center in Northern Taiwan

TSAI Hsiu-Ju, WEI Shu-Ping, CHEN Yi-Ting, YANG Chin-Chu, CHEN Yi-An, CHANG Betty Chia-Chen

Introduction

The number of Taiwanese people going abroad from 2011 to 2018 increased by 74.0%. The surge in traveling activities highlighted the importance of travel medicine clinic. However, the patient satisfaction rate for travel medicine clinic was only 73.1% in 2017. Reasons for the low satisfaction rate included long clinic waiting time complicated clinic process, failing to remembering instructions by nurses, lack of online registration option for travel medicine clinic, and absence of signs for travel medicine clinic in the hospital.

Purpose/Methods

We aimed to improve the satisfaction rate of travel medicine clinic from 73.1% to 85.5%. Intervention: Methods included making posters and guidance video (with QR code) outlining the clinic process, making informative pamphlets for patients to take home, making instruction manuals for nurses, implementing quality control audit process, adding the online registration option for travel medicine clinic on our hospital's web page and placing signs for travel medicine clinic in the hospital.

Results

Satisfaction rate for travel medicine clinic increased from 73.1% to 86.2%, and consultation time reduced from an average of 125 minutes to 71 minutes. We also included travel medicine clinic process and nursing guidance as items to be reviewed by the quality control board each year.

Conclusions

This project was successful due to cooperation and effort among physicians, nurses, computer engineers and project managers. In the initial stage of the project, many staff members were not familiar with the clinic procedures and the degree of cooperation was low. However, after incorporating the methods described above, the whole process for travel medicine clinic became very efficient.

Contact: TSAI Hsiu-Ju

MacKay Memorial Hospital
10449 Taipei, nydia16866@gmail.com

Linking mental health resources from hospital services to community services in west Taipei City

FANG Chun-Kai, HSIAO Hsueh-Wen

Introduction

West side of Taipei is an older area, including Datong, Wanhua, and Zhongzheng districts. The population is over 470,000 (December 2018). There are a lot of health-related units, such as elder service units (n=46), disability service units (n=60), community service units (n=83), women and children service units (n=31), and so on. Even there are 6 general hospitals in west Taipei, but no one can provide linking resources for all units. Taipei City Government authorized Taipei MacKay Memorial Hospital (located in Zhongshan district, beside west Taipei) to provide linking resources for the three districts.

Purpose/Methods

The linking resource program was practiced in 2019 and involved 4 parts, including professional mental services, linking social resources, professional supervision, and propagandizing health policies. In addition, if some critical mental events happened, MacKay Suicide Prevention Center (SPC) should response and manage immediately.

Results

Among professional mental services, there were 34 patients receiving 291 sessions of psychotherapies, 200 suicidal attempters receiving telephone counseling, and 55 unstable psychotic patients receiving home visiting services. For linking social resources, MacKay SPC conducted 2 linking meeting with professionals working in community, and 44 professionals attending. For professional supervision, MacKay SPC conducted 9 sessions and 484 staff attending. For propagandizing health policies, there were 2 media reports.

Conclusions

Even in urban areas, some mental health resources were difficult to approach. A powerful unit to link several different units is a practicable method to expand efficiencies. In addition, mental health providers in community can accept supports and find resources easily.

Contact: FANG Chun-Kai
MacKay Memorial Hospital
Taipei, chankai.fang041@gmail.com

Case management experience of caring for a patient with primary pulmonary hypertension

CHANG Yu-Chen

Introduction

This article describes the case management experience of a patient with primary pulmonary hypertension. Under the dual pressure of rare diseases and insufficient self-care ability, the case caused anxiety and medication non-compliance, which triggered the motivation of the author to discuss.

Purpose/Methods

During the nursing period from January 15, 2020 to May 18, 2020, according to Gordon's eleven functional health assessments, through observation, interviews, medical record review, and telephone interviews to collect data and analysis, establish the patient's heart output Three health problems: reduction, anxiety, and non-compliance. In response to the above problems, use case management methods to intervene in guidance, integrate effective health care, and jointly formulate a care plan with the case, so that the case can learn self-care skills and use relaxation techniques, thereby reducing anxiety.

Results

During the period of personal care, the patient suffered from breathing wheezing and depression and swelling of the lower limbs during activities due to reduced cardiac output due to illness. The case faced the pressure of rare diseases and insufficient self-care ability, which led to health problems such as anxiety and non-compliance with medication. Therefore, the case management method is used to intervene and guide the case to draw up a care plan, to encourage the case to learn self-care ability, including medication compliance, correct diet and intake, and water restriction, etc., and to teach the case at home to use relaxation techniques, such as: abdominal breathing, meditation And listening to music and other methods to reduce the anxiety of the case, the improvement of self-care ability, and then reduce the rate of rehospitalization and improve the quality of life.

Conclusions

According to the results of literature review and case management care, the case has been improved obviously under self-care at home. However, the case has no restrictions on reading habits. Although relevant health education leaflets are provided, there are no applicable multimedia audio-visual health education tools. It is suggested that diversified audio-visual health education tools should be applied to promote repeated learning and practice of the case, and nursing guidance and consultation should be combined to facilitate the case to get answers quickly. In order to reduce the rate of rehospitalization, it is expected that this nursing experience can provide reference for such patients.

Contact: CHANG YU CHANG

Dalin Tzu Chi Hospital
No. 2, Minsheng Rd., Dalin Township, Chiayi County, Taiwan
(R.O.C.), 622 Chiayi,
happyssom6929@gmail.com

Reduce the incompleteness rate of operation's surgical pathological

TSAI Chia-Lin

Introduction

The specimen is an important part of the safe operation of the patient and an important indicator of the patient's treatment course. During the operation, the operation time and the patient's urgency are considered. How to use the correct surgical specimen process (including before, during and after the operation) to transport the personnel correctly for pathology Physician testing is used as the basis for treatment and diagnosis. Any incomplete operation process will be delayed and affect the patient's medical care plan.

Purpose/Methods

According to the relevant procedures, the relevant personnel include surgical specialists, operating room nurses, transmission personnel, etc., and the above-mentioned personnel analyzed in order, mainly because they did not know the examination items and did not inform Checking the sample, failing to hand over the shift, not knowing how to deal with the small sample, not checking the inspection sheet, checking the sample without setting standards, not checking with the pathology department, etc. In order to reduce the incomplete rate of specimens, review the nursing handover process and modify it, review and modify the special responsibilities of surgery, include the handling of specimens in education and training, formulate regular review of education and training items, and include the size and handling of specimens in the norms, Make reminder slogans in the examination room, post and increase standard protection equipment, and reduce the risk of formalin brewing.

Results

After the implementation of the project, the incomplete rate of surgical pathological examinations dropped from 1.13% to 0.01%, which effectively implemented the purpose of the project, reduced the incomplete rate of surgical pathological examinations, and participated in the team to jointly promote the quality of care.

Conclusions

Patient safety is not only an evaluation index for patients but also for each hospital. It will be an ongoing goal to improve the quality of relevant medical care by simplifying the process and reducing change factors.

Contact: TSAI Chia-Lin

Mackay Memorial Hospital Hsinchu
8F. No. 12, Ln 27, Zhongxiao Road East District No. 48, Lushui Road, 9th F, 30069 Hsinchu City,
m158@mmh.org.tw

The Nursing Experience of Caring an Outpatient After Breast Reconstruction

CHIU Su-Erh, HUANG Yu-Hsin, LI Feng-Chen, LIN Hsin-Chen, CHEN Li-Chen, HO Lun-Hui

Introduction

Development of breast cancer treatment, the survival rate of breast cancer patient increased. The quality of life becomes an important issue. In addition to breastfeeding, breasts are an important symbol of body appearance and gender for women.

Purpose/Methods

This article describes the nursing experience of a breast cancer patient undergoing breast reconstruction surgery after undergoing physiological changes that caused psychological shock. Nursing care during outpatient for 2019/09/23-2019/12/30, data collage for chart review, physical examination and visited. Use Gordon11fracture health assessment, analysis, case health problem have pain, anxiety, body image change.

Results

Nurse process, The role of support, care and instructor, Establish a good nursing relationship with the case, g wound care and relaxation skills during care, provide breast cancer health education materials, arrange breast cancer patient experience sharing and encourage participation in breast cancer associations and groups to share anxiety, and then adapt to the body after breast reconstruction surgery Changes and can return to the workplace.

Conclusions

This experience of breast cancer patients breast reconstruction surgery, we will provide recommendations and references for the care in the outpatient clinic in the future.

Contact: SUERH chiu

carolchiu@cgmh.org.tw

Analysis of Zip Codes influencing the Pain Score of Patients with Chronic Pain

LEE Ji Hong, BHANDARI Ashish, BOMALIYAMU Aimaiti, ISHII Momoko, RITMAN Stephanie, LEE Yu Jeong

Introduction

The zip codes and counties can indicate neighborhoods' ability to access clean air and water, safe and affordable housing, quality food, and proper education. Communities just a few blocks away from each other may experience large variations in average life expectancies, annual household incomes, and other social predictors of health. Chronic pain is another prevalent issue and affects 20-30% of the population in Western countries and treatment remains an issue. By assessing the pain scores of individuals with different zip codes, we can determine how zip code's median income affects the pain of individuals.

Purpose/Methods

This retrospective study aims to investigate the effects of the United States Postal ZIP Code on pain scores. A group of 500 patients, half women and half men over 18 years of age, and had pain for at least three months, were analyzed in this study. The variables used in this study were zip codes, counties, baseline pain scores, BMI, race, gender, primary diagnosis, secondary diagnosis, and smoker/nonsmoker. Patients from states of Massachusetts, New Hampshire, Rhode Island, and Maine were grouped by counties. Median household income and average life expectancy of each county/state were analyzed and compared to patient's baseline pain score in that county using regression models (linear, logistic, non-parametric).

Results

We hypothesize that median household income of zip codes statistically influence patient baseline pain scores after accounting for effects of other variables, BMI, race, gender, primary and secondary diagnoses, and smoking status.

Conclusions

ZIP codes can be used as an indicator of pain scores. Using such demographic data of patients, we can potentially account for

health disparities in clinical settings to provide a more holistic approach to treatment of pain.

Contact: KIM KUE SOOK

Seoul Metropolitan Dong_Bu Hosp Health Promotion Center/
KIHIP, Seoul National University College of Medicine, 103
Daehak-ro, Jongno-gu, Seoul 0284 SEOUL,
mdkimks00@gmail.com

Does continuous passive motion (CPM) increase active knee flexion in patients with total knee replacement (TKR)?

LU Chia-Yen, HSU Tzu-Chuan, HUANG Hui-Ting

Introduction

Knee osteoarthritis causes pain and/or stiffness, even deformities and bone spurs in patients' knee joints, restricting their mobility. When severe knee osteoarthritis leads to inconveniences in patients' daily activities, total knee replacement (TKR), a surgery aiming for better knee range of motion, has to be considered. Despite that empirical literature has found no significant difference between patients with and without continuous passive motion (CPM), the 136 patients in our hospital's surgical ward who received TKR in 2018 still applied CPM routinely for rehabilitation. Therefore, the purpose of this study is to explore the effect of CPM and isometric exercises taught by orthopedic health educators on active knee flexion in patients with TKR.

Purpose/Methods

1. We searched papers of systematic review (SR) and randomized controlled trial (RCT) published in either English or Chinese in the recent five years in databases, including the Cochrane Library, PubMed, and Airtiti Library, by using keywords and Boolean logic (AND and OR). One SR (2019), with JBI Levels of Evidence of Level 1.a, was found meeting our criteria. It was critically appraised by applying the JBI SR critical appraisal tool and then compiled into evidence. This SR (Yang, 2019) incorporated 16 RCTs and concluded that no significant difference exists between patients having and not having CPM after TKR. 2. This study was conducted in our surgical ward between July 15 and August 5, 2019, with patients assigned either to an experimental group or a control group. Those in the experimental group (n=5) did not have CPM after TKR while the control group (n=5) did starting from day 1 to day 5 after surgery. The two groups' knee flexion was measured on a daily basis.

Results

No significant difference of the average knee flexion was found between the two groups. However, patients in the control group had to tolerate the discomfort of knee bending by CPM machine, resulting in higher pain score. We therefore suggest that certain patients may be exempted from having CPM after TKR if agreed by the physician and orthopedic health educator so as to reduce post-operative pain and enhance perceptions of treatment. We believe that healthcare professionals of the surgical ward should take this result into account in clinical settings and that no new CPM machine is needed next year.

Conclusions

Nurses, orthopedic health educators, and physical therapists are recommended to design physical therapies suitable for patients with TKR. Isometric exercises, such as straightening and lifting legs as well as knee flexion and extension, planned for proper frequency and duration on a daily basis could be beneficial. In addition, nurses should engage in more interaction with the patients to assist with alleviating pain and discomfort if such case is observed. Patients then would not have to put up with the uncomfortable tension caused by CPM.

Contact: LU CHIA-YEN

139356@tshsda.org.tw

Healthcare case book project „You and I, Bridge for us“

ROH Young Soo, LEE A Ram, KIM Do Yeon

Introduction

After the 2017 Act on Health Rights and Medical Accessibility Security for the people with disability was enforced in Korea, the paradigm of disability health care has been transformed from hospitals to communities and from professionals to clients. However, there has been critical gaps in liaising the people with relevant community services and navigating the service users, especially including people with disability, due to the lack of user friendly guide in the community. Considering those needs, produced the first healthcare case book titled "You and I, Bridge for us". The purpose of this project is to promote the health and prevent secondary disease of people living with disability in the community, from their perspective.

Purpose/Methods

"It'da, Bridge in English" refers the brand-new health care management system from the local health care center, that aims to effectively manage resources in local areas. That includes the stories of 37 people who are related to medical institutions and public healthcare centers. The casebook has been designed to increase the accessibility for the people with disability (ex. Voice Conversion Barcode Voice Eye applied) and an online e-book publication at a time.

Results

It is meaningful because it has led proactive community participation and increased in the number of cases similar to the case book. Additionally, it has contributed to improve general health from the people with disability through a systematic health management system. As a result, it has won the Excellence Award in Social Contribution Activities at the Korea Communications Awards last year.

Conclusions

The key message is that anyone can easily access medical services and community can play significant role to support people maintain their healthy life within the community together. We are sure that a new paradigm has been suggested from the case book "It'da", which is different from the traditional perspective towards to disability.

Contact: LEE ARAM

SMG SNU BORAMAE MEDICAL CENTER
07061 Seoul, leelove3010@naver.com

Using Cancer Resilience to Improve Breast Cancer Recurrence with Fungating Wound

LAI Chin-Ping, LEE Li-Chun, LIU Hui-Ling, TSENG Meng-Chuan, FAN CHIANG Yu-Chen, CHUANG Shu-Ting, CHIEN Sou-Hsin

Introduction

Studies show that the recurrence rate for breast cancer after five years of surgery is 13.1%. Clinically found that patients will have anger, hopelessness, social isolation and other conditions when Cancer Recurrence with fungating wound. Improving the cancer resilience of patients can enable patients to correct their thoughts, learn self-care, and improve the quality of life.

Purpose/Methods

This study is to assist a breast cancer patient to use cancer resilience to improve the self-care ability of breast cancer recurrence with fungating wound. To strengthen patient care for cancer resilience through the following measures: (1) instructing patients the right wound care skills to improve the patients' sense of self-control of the disease (2) taking advantage of support groups such as the patients association to promote positive thinking and social interaction (3) providing long-term care resources after returning home.

Results

The results of the patient evaluation after nursing interventions, as follows: (1) patients and their families can perform wound care correctly after learning. (2) patients participate in support groups and life review to create new meaning and value in life and reduce anxiety about death. (3) long-term care resources are involved in establishing social support networks to reduce the burden on families.

Conclusions

Breast cancer is 1st cancer among women in Taiwan. However, with the improvement of survival rate, patients need to change and readjust the original life style, which is the problem that patients need to face in the future. In order to cope with the physical, psychological and social impacts of cancer survivors by strengthening the resilience of cancer and home-based caring, it helps patients to achieve positive adaptation and promote self-efficacy so as to improve the quality of healthy living.

Contact: FANCHIANG Yu-Chen

Buddhist Tzu Chi Medical Foundation
Taichung City, df13536@tzuchi.com.tw

Nursing Experience for a Terminal Hepatocellular Carcinoma Patient with Hopelessness

CHEN Yu-Rong

Introduction

The article described the nursing experience of a man with terminal liver cancer. He suffered from pain, ascites and edema

of lower limbs. He was also threatened with death because of the incurable cancer. As a result, he lost hope for the future and came up with a feeling of hopelessness, that motivated the author to investigate the case study.

Purpose/Methods

During the nursing period from June 17 to July 9, 2020, interview, listening, observation and Gordon's 11 items of health function assessment were used to make overall assessment, which established problems of chronic pain, fluid overload and hopelessness. Visual analogue scale was used to assess the pain severity of the patient. Relaxation technique with deep breathing, diversion, and analgesics were used for pain relief. Low salt diet and oral ice (to decrease thirst sensation) were used to alleviate ascites accumulation, and lymphatic massage to improve lower extremity edema. Rapport was established through consistent accompany and empathy. Old photos were used to help the patient to review life memories. The patient and his family recalled the past life memories and family travels, which increased the feeling of belongingness, encouragement, and affirmation and helped the patient to find life meanings and values. Family meetings assisted the patient and his family to reach a consensus on the future. We also encouraged the patient to engaged in self-care to increase ambulation and values.

Results

After deep breathing relaxation technique, diversion and use of analgesics, the pain was relieved successfully, and the pain score was below 2 points. The lower extremity edema was improved from 3 + to 1 + and the abdominal circumference was reduced from 93cm to 91cm. Reviewing old photos facilitated the patient to express the bucket list. The family members could also express their feelings and consensus, and cherish the last time.

Conclusions

Reviewing literature, the use of diversion and deep breathing relaxation techniques can relieve pain. Low salt diet and lymphatic massage can improve edema. However, the incurable cancer resulted in hopelessness of the patient. The nursing staff provided continuous care and encouragement, and facilitated the patient to find life meanings and values. The nursing measures optimized patient care and disease self-care, which was consisted with goal of Health Promoting Hospitals and Health Services.

Contact: CHEN YU RONG

Dalin Tzu Chi Hospital
622 Chiayi, yurongbaby@yahoo.com.tw

Using cross-team cooperation to establish hemodialysis patients in the treatment of hepatitis C care model

SIE Yi-Sin, LIN Chih-Yu, WONG Bao-Mei, JHAN Ya-Ting

Introduction

About 10% of hemodialysis patients have hepatitis C. Hepatitis C will progress to liver fibrosis, cirrhosis and liver cancer. The overall risk of death is increased, and there is also a risk of infection. Patients should actively receive hepatitis C antiviral

treatment. Reduce complications. Since January 106, Taiwan's National Health Insurance has offered full oral antiviral treatment, and prevention and treatment of hepatitis C has become one of Taiwan's important public health policies.

Purpose/Methods

Establish a "Hepatitis C Treatment Team" to establish cross-level and multi-specialty team cooperation, and formulate the "Hepatitis C Treatment" SOP for Nephrology. After the attending physician agrees to the treatment policy for hepatitis C patients on dialysis, he initiates a cross-team care process for hepatitis C patients on hepatitis C dialysis. During the treatment, team members are encouraged to receive complete treatment through nursing and health education, and complete team shifts and shifts through electronic medical records. Complete treatment care.

Results

Taking hepatitis C in the hemodialysis room of the Central Hospital as the research group, the collection period is from 107/06/01-108/09/01. The total number of people admitted to liver C is 25 (N=25), and they have received oral antiviral treatment. 24 people in 8 weeks and 1 person in 12 weeks. The results: (N=25) The HCV viral load: Not detected detection reached 100% in the fourth and eighth weeks after the end of treatment.

Conclusions

1. Most dialysis patients have severe itching side effects during the period of full oral antiviral drugs, which leads to the desire to stop treatment. 2. After healing, patients with elevated AST and ALT will be referred to Hepatobiliary Gastroenterology for follow-up. After discussing with the infectious disease doctor, set up a hepatitis C healing dialysis area, and strengthen the monitoring test report and record the hepatobiliary ultrasound tracking time for this group.

Contact: YI-SIN SIE

CHANGHUA CHRISTIAN MEDICAL FOUNDATION CHANGHUA CHRISTIAN HOSPITAL

Yuanlin, 1512919@cch.org.tw

The Strategy and Effectiveness of Promoting Lean Healthcare Management and of Optimizing the Health Care Process - Taking example from a Regional Hospital in Southern Taiwan

WU Chin Wen, CHEN Szu Yu, CHEN Hsiu Shan, LEE Chia-Fang

Introduction

When faced with circumstances such as the challenge of OT and BOT and changes in health policies and health insurance system, lean management has been adopted extensively in the medical industry to improve the provision of exceptional quality of care. That is why the case hospital hopes to apply lean management and to incorporate smart medical care, information and technology into the operational procedure and work flow

improvement, so as to reduce the manual work load and to save time.

Purpose/Methods

The methods were predominantly of holding lean management training workshops, training seeded candidates, conducting hospital-level project tracking, and counseling by lean experts. Putting the focus on the five major procedures of outpatient, emergency, hospitalization, surgery and administrative management, the hospital may optimize the health care process. By using 5S and value stream analysis to analyze improvement related operations and care procedures, the unnecessary time and cost wasted by clinical and medical staff are reduced.

Results

A total of 31 projects were launched in 2019-2020, extending over 24 departments, and 5 major procedures, optimizing the outpatient, inpatient and emergency services, surgery and administrative management processes, and conducting a time and cost related comparison with the pre-lean management implementation figures. According to statistics, by implementing the lean medical project, this hospital has managed to reduce the work hour and the amount of man-hour cost per year of all staff as follows: a total of 5852 hours and NT\$1,410,996 respectively.

Conclusions

The introduction of lean management has definitely been effective in that it allowed the clinical and medical administrative units to re-examine their work content and to consider the ways in which waste can be eliminated so as to improve the medical quality and work environment, and to optimize the health care procedures, thus obtaining a better overall quality in the medical treatment provided. In this way, the leverage benefit of re-engineering the organizational culture and lean management was reached.

Contact: WU Chin Wen

wendy0204520@gmail.com

Building an information notification system to improve chemical safety mechanisms for hepatitis B patients

CHENG Chien-Hsiang, WANG Yi-Ting, HSIEH Hui-Hsia, FAN CHIANG Yu-Chen, CHUANG Shu-Ting, CHIEN Sou-Hsin, TSENG Meng-Chuan, LIU Hui-Ling

Introduction

The prevalence of hepatitis B is high in Taiwan, and about 60% of adults have been infected with hepatitis B virus (HBV). According to statistics, after patients of hepatitis B receive chemotherapy, the risk of HBV reactivation is 21% -53%, and even causes 5% - 20% mortality. It is clinically recommended to avoid HBV reactivation and reduce chemotherapy treatment interruption or death during chemotherapy. Patients need to take hepatitis B antiviral medicine before chemotherapy, so that chemotherapy can be successfully completed.

Purpose/Methods

In order to avoid reactivation of HBV during chemotherapy for hepatitis B carriers, the medical team has established a chemotherapeutic drug safety mechanism: 1. Proposed by the patient safety management committee in the hospital, the medical, pharmaceutical, nursing, and administrative teams establish consensus and formulate treatment guidelines for chemotherapy. 2. Setting up an information system to force HBsAg to be tested before prescription of chemotherapeutic drugs in hospitals. Positive patients must be combined with hepatitis B antiviral drugs to be able to prescribe chemotherapeutic drugs. 3. Organizing education training and monitoring its effectiveness.

Results

Hepatitis B carriers were treated with hepatitis B antiviral drugs before receiving chemical drugs treatment for the first time for an average of 26 persons per years from 2011 to 2016. After the system was built, it increased by 1.96 times, with an average of 51 people per year from 2017 to 2019.

Conclusions

Patients receiving chemotherapy should be discontinued when HBV reactivation results in side effects, causing severe morbidity and mortality. Therefore, it is necessary to establish the entire information support system so that every hepatitis B patient must use hepatitis B antiviral drugs before receiving chemotherapy.

Contact: FANCHIANG Yu-Chen

Buddhist Tzu Chi Medical Foundation
Taichung City, df173536@tzuchi.com.tw

Using multimedia devices to improve chest x-ray poor inspiration of foreign workers

HAO Ching-Jung, CHEN Jen-Chich, YEN Chia-Chi, LIN Chun-Yu, HUANG Ming-Ren

Introduction

After foreign workers enter our country, the first job is a general health check. Chest X-ray is one of the necessary inspection items. However, most foreign workers do not understand Chinese and English. Therefore, chest X-rays are often caused by insufficient breathing. The lung field range becomes smaller, causing doctors' troubles in interpretation and increasing the probability of misjudgment.

Purpose/Methods

The main objective of this study was for foreign workers to understand the instructions of their mother tongue and to increase the lung field without moving the body when exposed to chest X-rays. Step 1: Find the foreigners who serve in our hospital, including the Philippines, Thailand, Indonesia, Vietnam, etc., and record the mother tongue of "please inhale and hold your breath and do not breathe". 3. Play sound files belonging to their mother tongue through speakers during x-ray exposure.

Results

Because the speed and intonation of the mother tongue of different countries are different, after several fine adjustments,

the subject can understand the sentence and broadcast it to foreign workers. Interrogation and diagnosis by radiologists, and surveying physicians' satisfaction increased from 70% to 95%, indicating that this research method has significantly improved the physician's diagnosis.

Conclusions

Through the broadcast of multimedia, foreign workers can understand and meet the diagnostic standards of doctors, can help the irradiation process to be smooth and fast, reduce the re-irradiation rate, and improve the quality of exposure, and reduce medical problems caused by poor communication.

Contact: JEN-CHIEH Chen

Kaohsiung Municipal Min-Sheng Hospital
jeff731@gmail.com

Smart mobile medical service for osteoporosis of veterans in southern Taiwan

HUANG Wan-Yun, LIOU I-Hsiu, CHANG Shin-Tsu, CHEN Jin-Shuen

Introduction

Osteoporosis is the most likely cause of falls and dementia in the elderly community. Encouraging the elderly with osteoporosis to exercise regularly every week can help these elderly maintain their muscle strength and reduce the risk of falls. Health is a very important issue in these populations. Good fitness is related to physical activity and healthy lifestyle. Therefore, fitness training is very important to people with osteoporosis. We aim to investigate the satisfaction of smart action medical service among people with veterans and to investigate the prevalence of osteoporosis. We also aim to investigate the effect of task-oriented rehabilitation on osteoporosis among people with veterans.

Purpose/Methods

This method is based on randomized control study. We will include 40 people with osteoporosis among people with veterans and distribute to control group and experimental group by randomization. The experimental group will receive task-oriented rehabilitation, and the control group will receive video home training and education. Bone density examination, body component analysis, handgrip muscle strength, lower limb muscle power, time up and go test, gait speed (10MWT), WHO Quality of Life BREF (WHOQOL-BREF) and satisfaction evaluation will be tested at baseline, on the third month and the fourth month.

Results

Out of 40 randomized subjects, 22 completed all aspects of the study protocol. Compared to the control group, the experimental group improved significantly on time up and go test ($P=0.044$) from Week 12 to Week 16. The experimental group also improved significantly on 10MWT ($P = 0.031$) from Week 12 to Week 16. Compared with the CG, WHOQOL-BREF ($P = 0.014$) significantly from week 0 to 12. The chair stand test ($P = 0.045$), hand-grip muscle strength of left hand ($P = 0.018$) significantly increased from week 12 to 16.

Conclusions

Task-oriented mobile training can improve balance and cardio respiratory endurance for people in southern regions with osteoporosis. It can reduce the risk of falls and improve the quality of daily life.

Contact: HUANG WAN YUN

Kaohsiung Veterans General Hospital, Department of Physical Medicine and Rehabil
ballan666888@gmail.com

Investigation and analysis of doctor's medication in outpatient people with chronic disease

WU Ju-Fang, SU Chen-Ying, SHIEH Po-Chuen

Introduction

Patients are the main body of medical services, and drug use is an important part of the treatment of diseases, so patients should actively inform the current use of drugs or special conditions, will facilitate more accurate diagnosis, and determine appropriate treatment. In the process of providing medical services, both sides of the disease should be responsible for communication and supervision, jointly taking up responsibility and effectively reducing the occurrence of drug negligence. The goal of this study was to determine the overall effects of Participants were surveyed about their knowledge and experience regarding the 'five core capability for drug safety'.

Purpose/Methods

Utilizing Cross-sectional research design as the theoretical framework, this study employed a questionnaire to sample the views of 215 patient, and a test to measure "Will you take the medicine according to the doctor's advice". Data for the study come from a survey of there is at least one chronic disease and a continuous prescription for the patient, aged 30~70 years. Statistical analysis was performed using SPSS software (version 20)

Results

The results from "Will you take the medicine according to the doctor's advice?" analyses indicated that 65.6% complete compliance with medication. The main findings are: (a) 68.8% Have you ever forgotten to take your medicine? (b) 76.7% answer No: "Do you have any difficulty remembering the time of taking medicine"? (c) 51.2% answer yes: "When you feel the condition improves, sometimes you stop the medicine automatically?" (d) 56.3% answer no: "Do you stop taking medications when you don't have a better prognosis?" (e) 70.2% answer no: "Do you have a pharmacist call in your home address book?" (f) 52.6% answer yes "Have you ever paid attention to the drug consultation phone on the medicine bag?" (g). 64.2% answer no "Did you call the medicine on the medicine bag?"

Conclusions

Three major findings emerged. First, 68.8% Forget to take the medicine situation. Second, 51.2% the illness will automatically stop the medicine. Third, 34.4% Adjust the medication according to the change of condition. Based on these findings, this paper suggests that improve the patient's knowledge of safe

medication. In conclusion, people should be encouraged to develop the habit of using drug records to reduce the situation of forgetting to take medicine.

Contact: JU FANG Wu

Kaohsiung Municipal United Hospital
 80455 Kaohsiung City, wdoris0110@gmail.com

The Happy Time-Health Promotion Program for people who are stroke in Rehabilitation Ward

LEE Shu-Chen, CHAO Shu Yuan, CHIANG Hui Chaun, LEE Yen Heng, SU Hsi-Hsun, LAY Huey-Jen

Introduction

Stroke ranks at fourth among top 10 causes of death in Taiwan. Stroke disables people from taking care of themselves in daily life. Such as, it limits people from social personal activities, it affects people from social or family's roles. Therefore, we introduce a health promotion program (Happy time, HT) during the patients' stay in hospital rehabilitation in order to reduce the impact caused by the disease and improve the motivation for rehabilitation treatment.

Purpose/Methods

We design HT program which include structural courses of 4 units including the "psychological adjustment of stroke", "physical symptoms", "fall prevention" and "social resources and preparation for discharge". The duration would be once a week, an hour at a time, total of four times as a cycle. This course designed as an open discussion on problem communication and sharing experiences. We use the Mandarin Version Stroke Impact Scale (M-SIS) as a tool to conduct a pre-test and post-test questionnaire survey.

Results

A of 32 participants participated in the HT project and completed the M-SIS pre and post 10 months. The results showed that the patients' muscle strength, memory, emotional, ADL, mobility, hand function and social participation have all improved. Except for the communication ability, participants all showed significant differences, with an average improvement rate of 30%. The HT program demonstrated that stroke can help improve the physical, psychological and social impact of stroke patients.

Conclusions

According to the questionnaire analysis before and after the M-SIS, we discovered that the health promotion program to intervene stroke patients has showed in eight aspects. The impacts to improve for stroke patients are significant. Most patients who are hospitalized would only pay attention to their individualized rehabilitation course. The HT project provides an important platform for medical communication and social rehabilitation. All participants accept each other, encourage and share with each other in the group to prepare for discharge and return to society.

Contact: SHEN HsuPing

Feng Yuan Hospital of the Ministry of Health and Welfare
hph@fyh.mohw.gov.tw

Poster Session 3: Health literate health care organizations

To Improve health and emotion of the seniors through the nutritional empowerment in daycare center

YANG Chih-Kai, CHANG Huang-Yu, TSAI Sheng-Hua, LIN Ching-Feng, LUO Jiing-Chyuan, LI Ling-May

Introduction

Nutritional problem in the elderly is an important geriatric health category that should never be ignored, especially its criticality in long-term care system. To achieve the goal of holistic health care, this program tries to improve elderly nutrition and health situation. It is hoped that the holistic care of "empowerment" can be effectively promoted so as to provide new development citation references for multifunctional community-based care model under the long-term care service system in the future!

Purpose/Methods

The subjects of this study aim at 15 elders who had been served by the day care center, during the period of which interventions were carried out in the following three manners: I. Daily lunch and congregate meals served II. Nutrition and health education three times per months III. Revision and review of lunch cycle menu After 6 months of intervention, MNA (Mini Nutritional Assessment), GDS (Geriatric Depression Scale) and satisfaction survey were conducted and collected from the elders.

Results

From March 2020 to September 2020, the score of MNA (Mini Nutritional Assessment) of the 15 elders served by day care center at our hospital increased significantly from an average of 19 to 23.2 ($P < 0.05$), with the score of GDS (Geriatric Depression Scale) dropped significantly from an average of 5.2 to 3.53 ($P < 0.05$). As for the result of satisfaction survey, the overall satisfaction point average had reached 5 points (very satisfied).

Conclusions

According to the finding of this study, in addition to improving nutritional status, it is also possible to encourage mutual support of older adults at long-term care institution and enhance internal cohesion and sense of belonging within the institution to practice the continuity of health care and build personalized care service plan for meeting the needs of elderly care and implementing the policy objective of holistic care through enabling companionship and comprehensive nutrition intervention.

Contact: LIN Ching-feng

Keelung Hospital Ministry of Health and Welfare
201 Keelung, chingfeng01@gmail.com

Health Literacy invite you to join-construct a human-centered care model

HSIAO Su-Hui, DUH Shi-Rong, LIOU Wen-Chin

Introduction

ST. Joseph Hospital has actively promoted health awareness and shared decision-making between doctors and patients. We hope to improve the concept and skills of health knowledge and ability of medical staff, shorten the cognitive gap between doctors and patients. Hold a series of workshops and promotion activities to share the empirical medical results, combining the needs of patients, effectively delivering the information and content, providing services that meet their needs to achieve the health promotion goals.

Purpose/Methods

In order to improve the communication skills, a workshop on "health literacy, speaking and writing so easy" was held, conducted in diversified activities, including group reports, scenario exercises and health education competitions, etc. In addition, we will hold the activity of "Medical questioner is me" in the outpatient hall, and select the QPL of each department by vote. Obtain questions that can be asked and feedback through the participation process.

Results

Through the creative health education competition, the winning team "COVID-19 Capture Team" used the inspection process to produce posters and videos, using simple and catchy formulas to reduce public anxiety. In addition, the "Medical questioner is me" activities selected the medical problems that people care about the most. The first one is chronic kidney disease, and the ST. Joseph Hospital's medical questionnaire "chronic kidney disease" was developed by the nephrology team.

Conclusions

Set up a health literacy promotion group under the leadership of the dean. Every year, according to different needs, the promotion policy is drawn up to organize competitions and voting activities, select information content that meets the needs of the public, and organize SDM team competition activities to enhance the team. Promote the driving force of the business, regularly review the friendliness of the health education materials in the hospital, in order to build a health literacy hospital.

Contact: TSAI CHIUNG YAO

St. Joseph Hospital, Kaohsiung, Taiwan
Kaohsiung City, minana2291@gmail.com

Discussion on the Effectiveness of Supervising Training for Medical Professional Social Workers

LIANG Shio-Ching, YEN Chia-Chi, LIN Chun-Yu, HUANG Ming-Ren

Introduction

In Taiwan, there are five branches of specialized social work, including medical social work. The Ministry of Health and Welfare promoted the qualification training organization for specialist social workers in 2014, standardized the education and training of social workers, and ensured service quality and individual rights. Our hospital was qualified in 2018 to conduct a three-year supervision program. This study explores the effectiveness of the plan, suggestions and reflections.

Purpose/Methods

The program content includes thematic discussion, individual supervision, group supervision, focusing on the two-way feedback of the supervision and the supervisee, and creating a supportive and positive supervisory relationship. There were 3 participants, including 1 supervisor and 2 supervisee. 4 scales, Likert scale, to be filled by the supervisor and the supervisee. Analysis with descriptive statistics. Study aims to review supervision program from 2018 to 2019 and evaluate effectiveness.

Results

Statistical analysis results showed that the core curriculum ($M=4.80$), the supervision and evaluation ($M=4.90$), and the evaluation of the supervised persons were high satisfaction ($M=4.68$). The supervisees self-assessed and their satisfaction increased slightly. Decreased only in training convergence practice ($M=3.87$). The results showed an emphasis on supportive, positive supervisory relationships, enhancing self-awareness, coping with stress, and self-care for the supervisee.

Conclusions

The results show that supportive supervisory relationships can help enhance the self-awareness, stress adjustment, and self-care of the supervised. Satisfaction with training convergence practices has decreased. It shows that it is tested on the knowledge base and the conceptualization of clinical services.

Contact:

allamia@mail000.com.tw

Enhancement of medical communication via health literacy material improvement

CHEN Yi Chen, LEE Shu-Chen, LIU Hui Hu, CHIANG Hui Chung, LAY Huey-Jen

Introduction

As a result of investigation, we found out that most of the people who seek medical treatment are elderly, which their education

level is low. Our health education leaflets are difficult to understand, therefore, in 2017, we began to improve health education tools. In the same time, we also promoted health literacy concepts and skills of medical staff. Using simple and easy-to-understand informations, we can help people make comprehensive medical decision to promote care quality.

Purpose/Methods

During the implementation of the project, 315 health education leaflets and 5 health education films were reviewed. (1) Education Training: Arrange Health literacy education for medical personnel. (2) Cooperation across units and teams: Including physicians, nurses, pharmacists, nutritionists, etc. (3) Optimizing health literacy materials: (a) Graphically: Use visual images to present key messages; (b) Refinedly: Keep the text concise and remove proper nouns; (c) Diversely: The media of health literacy is not only limited to paper leaflets, but also manuals, posters, videos, etc.. Combining internet and mobile technology to promote public health awareness. (4) Analysis pre-test and post-test from medical personnel and the public through health literacy questionnaires. (5) Standardization of health education leaflets.

Results

Project effectiveness: (1) 4 health literacy education training lectures were held for medical personnel, which average ratio reaches 100%, the pre-test and post-test progress rate reached 22.9%. (2) Optimized 36 leaflets for health education, 5 PDA's for SDM and 5 videos. (3) The medical personnel improvement of health literacy rate reached 24.6%, and the public's reached 10.8%.

Conclusions

The subject of health literacy is not only limited to the knowledgeable patients, it should also focus on the efforts and responsibilities of medical care providers to improve the friendly environment of health literacy. Effectively transfer health messages to the public is becoming our goal.

Contact: SHEN HsuPing

Feng Yuan Hospital of the Ministry of Health and Welfare
hph@fyh.mohw.gov.tw

Relationship between health literacy and risk of falling among the community elderly

TZENG Ya-Mei, LI Shan-Ru, CHANG Yaw-Wen, KAO Tung-Wei, KAO Senyeong

Introduction

In the ageing society, 80% elderly had at least one chronic disease and 60% old adults suffered from multiple chronic medical problems. Fall risk will be increased accompanied with multiple adverse medical conditions. Poor health knowledge may leads to poor health outcome. It is crucial to investigate health literacy about fall, to identify fall-related risk factors and to provide individualized fall intervention for elderly.

Purpose/Methods

This was a cross-sectional study measuring the health literacy of the elderly by mandarin multidimensional health literacy

questionnaire (MMHLQ) and the fall prevention literacy questionnaire (FHLQ). Tw-FROP-Com, a tool to investigate the fall risk of the elderly was also applied. To explore the relationship between the characteristics, the health knowledge and the risk of fall among the elderly, the independent sample t test, one-way ANOVA, the multivariate regression analysis and the generalized linear model analysis were used.

Results

We collected 140 participants, nearly 80% were female. The total score of MMHLQ, FHLQ and Tw-FROP-Com were 23.98, 24.22 and 4.30, respectively. Old adult's multidimensional health literacy and fall prevention health literacy were insufficient (49.4-50%) and limited (23.1%-25.0%). Community elders have significant differences in gender, age, educational level, place of origin, language in both MMHLQ and FHLQ. There was no significant relationship between MMHLQ, FHLQ and Tw-FROP-Com in multiple regression analysis.

Conclusions

Community elders are living with risk of falling, but their health awareness is still insufficient. The findings may have policy implications in terms of fall prevention and intervention among community old adults.

Contact: KAO Tung-Wei

Tri-Service General Hospital

114 Taipei, ktw61916@yahoo.com.tw

Practice of Advanced Care Planning with Local Communities -From the creation and dissemination of community-based ending notes-

SAKAKI Yoshiko, MOTEGI Hiromi, YAMAUCHI Yoshio, MINORIKAWA Shiho, SAKURAI Eri, HIRASHIMA Kumiko, ONODERA Yumiko, KOGURE Satomi, YOSHINO Hajime

Introduction

As the super-aging society accelerates, the concept of advanced care planning (ACP) was incorporated in the revision of the Guidelines for the Decision Making Process in the Last Stage of Life. Currently, the Ministry of Health, Labor and Welfare is promoting ACP as a policy under the name of "Life Conference". Since 2018, a public open lecture has been held to understand the needs of residents and create and disseminate ending notes. We report the progress.

Purpose/Methods

1) We held a public lecture for the community. Employees of various facilities related to nursing, such as doctors at home-care clinics, doctors / nurses at hospitals, visiting nurses etc. become a lecturer and held a learning session. At the study meeting, we exchanged opinions with participating residents. 2) We have started a project to create an ending note [Shitoko Note] to be shared locally. 3) We worked on disseminating ending notes in our hospital.

Results

1) Public lectures for local citizens Public open lectures were held six times in total, with more than 1,000 participants. 2) Ending note creation project Ending note was focused on explaining medical care (life extension treatment) which was highly needed from the community. 3) Ending note dissemination activities In November 2019, distribution of ending notes at the time of admission was started in the community-based care ward. The number of ending notes distributed in the region was 2,000.

Conclusions

Through these efforts, it was suggested that public open lectures and ending notes shared in the community are effective tools for starting ACP practice. We would like to continue implementing this ACP with the community in order to enhance the health promotion capabilities of the community that supports "living like that person". It is an issue to evaluate the spread and utilization in the region in the future.

Contact: KATSUYUKI Togashi

Saitama-kyoudou Hospital

k-togashi@mcp-saitama.ac.jp

Exploring the Joint Association between Contributing Factors and the Risk of Low Health Literacy among Community-Dwelling Old Adults in Taiwan

KAO Tung-Wei, PENG Tao-Chun, CHEN Wei-Liang, CHANG Yaw-Wen, LIAW Fang-Yih, FANG Wen-Hui

Introduction

To provide more efficient medical communication with general populations and to recognize their health literacy level is a critical issue during clinical practice. Multiple factors contributed to the levels of health literacy among old adults. How these factors interacted with synergic effect to interfere old adults' health literacy level warrants further estimation. The aim of this study is to explore the impact of possible contributing factors and their interactions on health literacy among community-dwelling old adults.

Purpose/Methods

Adults lived in the community with using Mandarin were enrolled. We used short-form Mandarin health literacy scale with scores from 0 to 11, and defined scores of 8 or more as high health literacy to compare the risk of low health literacy between young and old adults. Participants were divided into four groups by age and educational level, young adults with high educational level were treated as the reference to estimate the risk of low health literacy among participants.

Results

There were 271 participants enrolled. The mean age was 59.4±15.4 years old and 34% were male. Age, educational levels and jobs were associated with health literacy scores ($p<0.01$). The odds ratio of low health literacy in old adults with low educational level, old adults with high educational level, and

young adults with low educational level was 9.33 ($p<0.01$), 2.62 ($p=0.009$) and 3.09 ($p=0.033$), respectively. After multiple covariates adjustment, the risk of low health literacy among these four groups sustained.

Conclusions

Old age with low educational level was prone to have the highest risk of low health literacy among general populations. Nevertheless, young people with low educational level had relatively higher risk of low health literacy than those of old adults with high educational level. Age and educational level seemed to have the joint association with synergic effect on health literacy among community-dwelling old adults.

Contact: KAO Tung-Wei

Tri-Service General Hospital

114 Taipei, ktw61916@yahoo.com.tw

Effectiveness of nursing instruction with Health Literacy materials

CHEN Hui-Ling, CHEN Jin-Shuen

Introduction

Nursing staff often by verbal education or leaflet in health providing caregiver read. Therefore, nursing instruction leaflets are critical in the process of providing health care transmission. Now, Insufficient legibility of nursing instruction tools leads to poor effectiveness of nursing guidance. Under investigation, adults with Health Literacy in Taiwan are less than 25-30%. Therefore, the Nursing Department will gradually improve the health literacy-friendly material score and expect health literacy to maximize the spreading effect.

Purpose/Methods

Used Health Promotion Administration 「Health Literacy Friendly material score」 as a tool, questionnaires completed before and after. There is the total of 47 cases attended the course; 8 were medicine units, 20 were surgical units, 5 were general departments, 9 were gynecological and pediatric, and 5 were mental departments.

Results

The results had accurate response rates of 13.98 and 15.32 in the pre-and post-courses. Results also revealed 17 grading items, and those have made significant progress ($p<0.05$), and only 2 items are visual images, layout and design. For 17 grading items, the presentation of values score is easy to understand. The test score before and after is less than 60%, colloquial language, and intonation, summary or focus review and divide learning blocks appropriately progress rate over 20%.

Conclusions

Although changing the content of nursing guidance with health-friendly and friendly materials is limited, it is of great significance to amend important concepts in the production of nursing guidance. Medical personnel provides oral and written health knowledge, teaching materials, and communication, which improves the public's health knowledge. Achieving health parity and quality improvement that can reference a future revision of nursing instruction-related teaching materials.

Contact: HUI -LING CHEN

Kaohsiung Veterans General Hospital

hlchen@vghks.gov.tw

Poster Session 4: Health workforce practice and training

Using multiple teaching strategies to enhance the effectiveness by the Nurse Practitioner License exam

LIN Hui-Fan, KUNG Wan-Chuan, CHIANG Tsui-Ling

Introduction

In Taiwan, Nurse Practitioners need to go through 6 months of training and pass professional examinations. However, pressures in training may affect the learning effect. Apply multiple teaching strategies to enable the trainees to have logical reasoning and speculation ability. These professional abilities can be used in clinical work and improve the pass rate of professional nurse license exams, reducing the time spent repeatedly preparing for exams and coping with stress.

Purpose/Methods

The project will be implemented from December 2019 to November 2020. In a teaching hospital in Hsinchu, Taiwan. We use clinical scripts for case reports and reasoning, and apply team-based learning (TBL) mode to practice national exam questions. On-site shooting and playback of simulated video tutorials to enhance the understanding of objective structured clinical examinations, actual exercises and simulated examinations are arranged, and then Preceptor will provide feedback for each exercise to improve clinical decision-making and differential diagnosis capabilities.

Results

In October 2020, the passing rate of the Nurse Practitioner exam was 91%, and in December of the same year, the passing rate of the Nurse Practitioner exam was 90%, and the license rate of Nurse Practitioner in the whole hospital increased to 96%.

Conclusions

The most important professional ability of Nursing Practitioners is the logical reasoning and speculation ability of clinical reasoning. Through the training course plan, the core competence of the profession can be improved. The project adopts a variety of teaching strategies, and training nurses to participate in teaching can cultivate clinical critical and reasoning thinking and increase the effectiveness of learning. The results of the project can provide references for training hospitals for nurse practitioners in Taiwan.

Contact: LIN huifan

Hsinchu Mackay Memorial Hospital

m060@mmh.org.tw

The Effect of Two Ostomy Care Teaching Programs on Nurses' Knowledge and Skills Study

HO Su-Chin, YANG Shu-Chen

Introduction

Traditional classroom teaching program is centered on teachers, mostly one-way knowledge and technology, it could be carried out according to teaching goals. Flip teaching program is student-centered teaching and learning, Teacher-student interactions and discussions in teaching activities could successfully assist students in constructing knowledge and learning. The purpose of this study was to compare the effect between two teaching program on the nurses' knowledge and skills learning effect of ostomy care.

Purpose/Methods

The two-group quasi-experimental research design was adapted as a guide for this study. Seven-four nurses working in surgery ward of medical center. Twenty-eight nurses were assigned to an experimental group and forty-six were assigned to a control group. The control group was performed with traditional teaching, the experimental group was performed with flipped teaching. Tests were given to both groups before the ostomy care teaching program and one follow-up test was given one weeks after the program.

Results

By GEE analysis the traditional teaching knowledge had improved from 13.07 to 13.80 ($p = 0.000$), skills had improved from 4.59 to 5.44 ($p = 0.000$). The knowledge of flip teaching had improved from 13.96 to 14.68 ($p = 0.002$), and had made greater progress in skills, from 2.18 to 5.86 ($p = 0.000$).

Conclusions

Learning outcomes of traditional and flipped teaching program, we could see that both knowledge and skills had improved, but the method of flipped teaching had improved a lot in terms of skills, showed the effect of the way of flipped teaching pre-DVD learning and classroom discussion were very significant. It was suggested that the teaching method of clinical nurses could be applied more with the flip teaching method, especially the new nurses training should get better results.

Contact: HO SU-CHIN

MacKay Memorial Hospital
No. 45, Minsheng Rd., Tamsui District, New Taipei City
25115 Taipei, shelly@mmh.org.tw

Applying Simulation to Increase Emergency Disaster Resilience of Fire for Hospital Employees

TSOU Chien Jou, LIU Yun Chen, LIN Kuan Hung, KAO Mei Shih

Introduction

In recent years, medical institutions in domestic and foreign have frequently disasters; there were at least 10 fire incidents in 2019.

Fires in medical institutions not only threatened the safety of patients and employees but also effect damage to local medical resources. "Strengthening hospital fire prevention and response" is one of the goals proposed by the Joint Commission of Taiwan. The focus includes strengthening fire prevention facilities (preparation) and management, formulating emergency plans for the entire hospital and each department, fire prevention education and fire emergency training for personnel, and implementing them. In an intensive care unit, where patients are inactive and have multi-tube, need relying on medical staff to assist patients in emergency evacuation from the fire, that's has become an important issue. In this study, the management of the hospital using emergency disaster response plan to simulate the actual situation to strengthen the emergency response capabilities of the employees in the hospital for the fire emergency response and the performance of their duties, the integration of first aid and rescue and disaster prevention resources to reduce disasters.

Purpose/Methods

In this study, to simulate an intensive care unit fire at night in ICU, in June 2019. The unit wrote its own emergency disaster plan and exercise script, which was revised and revised by the management team. And the management of a total of 50 evaluation items was prepared; the evaluation results pass rate is only 50%. In September 2019, an emergency response drill and fire training course were taught by experts, to teach how to set up a unit self-defense fire group, conduct fire notification, start the emergency response process of the fire in the hospital, and how to make the "RACE" principle of the basic emergency fire evacuation process to be effective, and achieved initial fire suppression, personnel evacuation, and subsequent resettlement. Three times scenarios of realistic simulation exercises were conducted, and three stages were provided include the preparatory work planning, actual drill, and post-actual drill discussion and improvement, afford reverse feedback and feedback in the discussion. On September 20th, 2019, we will host another scenario simulation, review the results and investigate the satisfaction questionnaire total of five items from 39 employees who participated in the exercise.

Results

After expert guidance and education and increasing the number of actual drills, the actual pass rate of the drills was 100%. The satisfaction of questionnaire include the satisfaction of the employees on the drills (4.46 ± 0.51), could help them about the emergency disaster resilience (4.46 ± 0.55), could increase RACE knowledge (4.51 ± 0.51), and the satisfaction with the expert's service and teaching (4.59 ± 0.5), and the information satisfaction with providing emergency fire drills (4.46 ± 0.51).

Conclusions

Situational simulation is a very effective way to educate team skills, recognize the role of themselves and team members, and focus on patient/family/employee safety. Through how to communicate across teams, resolve conflicts between teams and make the team operate more effectively. Structural behavior of colleague's simulation, in the process and under the fire organization can understand their own responsibility, and then correctly implement because when a disaster occurs, the first choice and an effective evacuation path planning are very important, related to escape efficiency and survival of all.

Contact: TSOU Chien Jou

E-da hospital
ed5510893168@gmail.com

A comparison of differences between nurse aides' and registered nurses' perceptions of nurse aides' work competence in a skill-mix model institution

HSU Hui-Chen, KUNG Hsiang-Wen, CHIANG Wen-Jen, LEE Bih-O

Introduction

Background: Nurse aides provide a major support for long-term care services. However, research findings regarding the various aspects of nurse aides' work competence that may facilitate or impede their work performance remain inconsistent. Objective: To compare the differences between the nurse aides' and registered nurses' perceptions of the nurse aides' work competence.

Purpose/Methods

Method: The cross-sectional survey was employed. The settings were units implemented a skill mix model institution in Taiwan. The instruments consisted of the demographic data and the Nurse Aides' Work Competence Scale.

Results

Results: There are no significant differences between the self-perceived and the nurses' reported overall work competence of nurse aides. The results showed that the nurse aides had room for improving their work competence in terms of "problem solving" and "activity design". The nurse aides and registered nurses differed significantly in terms of "activity design" because the nurse aides' perception of their work competence in "activity design" was more positive than that reported by the registered nurses.

Conclusions

Conclusion: Nurse aides should be incorporated into cross-disciplinary teams. Activity design could be handled by other healthcare providers such as physical therapists or senior social workers.

Contact: HUI-CHEN Hsu

Nursing Department, Chiayi Branch, Taichung Veterans General Hospital, cyrcc@vgh.ttc.gov.tw

Improving the accuracy of phototherapy and care for neonatal jaundice

HSIAO Wei-Nung, HUNG Jia-Lu, CHEN Ko-Hua

Introduction

The accuracy of neonatal jaundice phototherapy may affect the quality of care for newborn. In 2019, our ward occurred a major event that endangered the infant who had to undergo exchange transfusion treatment due to negligence in observation by nurses. It's made surprising to us, must be in-depth analysis and

discussion on the quality of the phototherapy care. Propose a specific measures to improve the status, thereby providing accuracy of phototherapy's care and provide better medical care quality.

Purpose/Methods

Through education training, planning education courses, affecting the awareness and behavior of nursing staff, and use auxiliary teaching materials such as pictures, textbooks, or a variety of multimedia textbooks, etc. Help staffs learn to correct implementation process, enhance the professional knowledge and caring skills, strengthen the correctness of the care technology. Establish clinical care guide line, standardization operation, and self-evaluation can also improve the accuracy of phototherapy's care.

Results

Through a series of improvement measures, neonatal jaundice care workshops, and internal audits, the result is that the accuracy rate of phototherapy for neonatal jaundice has increased from 71.4% to 92.0%. After project implementation, holding education training and neonatal jaundice care workshops, the nursing staff awareness rate of neonatal jaundice phototherapy increased from 78.3% to 97.4%. The accuracy and awareness rate of neonatal jaundice phototherapy care was improved.

Conclusions

Using multimedia graphics files, graphic cards, holding education training, neonatal jaundice care workshops, and internal audits, etc., the accuracy rate of phototherapy for neonatal jaundice has been effectively increased from 71.4% to 92.0%. Unit of colleagues agreed that the use of teaching aids and actual operations in the neonatal jaundice care workshop can be close to the clinical care situation, and it can also learn and inspect the situation in both directions.

Contact: HSIAO WeiNung

CMU Children's Hospital

40447 Taichung City, n27826@mail.cmu.org.tw

Effects of Multicomponent Holistic Education Program Intervention on Advance care planning among Volunteers at Community Health Service Stations in Northern Taiwan

LI In-Fun, HSIUNG Yvonne, FANG Chun-Kai, HUNG TaChuan

Introduction

Advance care planning (ACP) aims at helping people clarify and communicate their values, beliefs, and preferences for future medical care during serious and chronic illnesses. Welfare in Taiwan clearly stated to promote integration and advanced planning of home hospice palliative care. Community-dwelling people still have many misunderstanding about palliative care in Taiwan. The aim of this study was to evaluate an educational program designed to prepare volunteer to promote advance care planning at Community Health Service Stations.

Purpose/Methods

The educational program was a 2-day program. The program was developed based on 5G Life (Good health, Good life, Good care, Good medical service, and Good death). The content included the philosophy of hospice palliative care, Hospice Palliative care Act and Patient Right to Autonomy Act, and communication skills for ACP. The teaching strategies included lectures, role play, and story-telling. The instruments used to measure the educational program were the Advanced care planning Survey and knowledge about the Hospice Palliative care Act.

Results

A total of 69 volunteers were recruited and completed the educational program. 94.2% were female. In the test of knowledge of the Hospice Palliative care Act and Patient Right to Autonomy Act, the pretest mean score was 63.5%, and the posttest means the score was increased to 88.9%. Curriculum satisfaction was the most helpful to know the legal knowledge to promote ACP in the future, and to understand the hospice palliative care model in Taiwan.

Conclusions

Our findings reveal that a systemic educational program can effectively increase the knowledge of ACP. Volunteers more recognized the importance of ACP for serious and chronic illness patients, and also willing to actively promote ACP at Community Health Service Stations.

Contact: LI INFUN

Tamsui MacKay Memorial Hospital
251 New Taipei City, lif1129@gmail.com

„If I Am You-Experiential Learning“ in Clinical Teaching of Psychiatry

**CHENG Suzu, LIU Meiling, CHEN Huizhen,
YAO Wenzhen, WANG Shere-Er, LIN
Ching-Feng, LUO Jiing-Chyuan, LI Ling-May**

Introduction

To make students feel hospitalized for psychiatric patients, to improve their knowledge and skills, to think and grow on their own, to provide more friendly care.

Purpose/Methods

The first week was through the teaching of communication skills, role-playing, and meeting with patients. In the second week, through the experience of auditory hallucinations, the patients experience the mental symptoms. In the third week, experience the restraint of limbs, enter the protection room, wear restraint, etc., and feel the process of patients being treated. On the fourth week, the psychiatric patient experienced the inconvenience of the patient in a closed environment by playing the role of the patient.

Results

115 trainees from 106.05.22 to 108.05.31, nursing students' knowledge of psychiatry The average number of pre-tests is 73 points, and the average number of post-tests is 94 points. The satisfaction of the teaching activities provided by the internship units with the internship goals reached 96.78%. Students said

that experiential learning methods are special and novel, they can motivate and return with a lot of learning. They also learn a lot of things that you would not know without witnessing them.

Conclusions

It also provides experience opinions during the study, e.g.: the protection room can play light music for patients to relax, the choice of color can be soft, such as pink; the round neck of the restraining clothes is more comfortable to change the V shape; Popular trends, the purchase of X-BOX one, mini hardcover game machines, puzzle game equipment, activity design increase digital somatosensory groups, mentally strong cognitive groups.

Contact: LIN Ching-feng

Keelung Hospital Ministry of Health and Welfare,
201 Keelung, chingfeng01@gmail.com

Increasing the Health literacy and workplace health promotion of healthcare professional through empowerment

**LIN Yu-Ting, CHANG Huang-Yu, LIN Ching-Feng,
LUO Jiing-Chyuan, LI Ling-May**

Introduction

The primary responsibility for improving health literacy with public health professionals and health care organizations. To improve the health literacy of patients, we have to enhance the health literacy of healthcare professionals. In order to elevate healthcare professional's health literacy, achieve a healthy lifestyle and meanwhile improve workplace health promotion, we have designed different topics on therapeutic diet. Motivate healthcare professional to self-execute, cook therapeutic diet, that is to say, empowerment. And healthcare professional could develop a healthy life style.

Purpose/Methods

Designed different topics on therapeutic diet every month. Each class will be taught teaching different therapeutic diet backgrounds and methods, chef teaching cooking skills, then healthcare professional will be cooking by themselves. They will be impressed with the self-operation. The course lasts 26 months, The last event was held on May 3, 2021. In the form of buffet, everyone is allowed to choose healthy food, the Dietitian also guides the correct way of food selection on the spot.

Results

It began in April, 2019 up to May, 2021. 21 month course, The total was 202 person-time. The average therapeutic knowledge score we tested before was 89.6, afterwards the score rose to 98.6, and the satisfaction rate was 100 %.

Conclusions

In conclusion, we could improve healthcare professional's health literacy through the therapeutic diet class. Meanwhile, we could also upgrade self-execute, cook therapeutic diet, and develop a healthy life style, to achieve workplace health promotion.

Contact: LIN Ching-feng

Keelung Hospital Ministry of Health and Welfare
201 Keelung, chingfeng01@gmail.com

Human hazard prevention plan

LIN Shu-Ling

Introduction

To promote the health and well-being of hospital workers, prevent and avoid repetitive musculoskeletal injuries, and promote the prevention of hazards. Apply knowledge related to human factors engineering to prevent the occurrence of work-related musculoskeletal injuries caused by long-term exposure to unsatisfactory working environment, repetitive work, poor working posture or improper work time management in the hospital. And formulate prevention plans for human hazards in accordance with the relevant provisions of the Occupational Safety and Health Law.

Purpose/Methods

In the first year of implementation, the goal is to complete the preliminary screening procedures for the investigation and analysis of the status of musculoskeletal injuries of all hospital workers, and to carry out active musculoskeletal investigations, after the hazard assessment and the proposed plan improvement, continuous improvement and annual follow-up.

Results

Conduct a questionnaire survey to analyze the workers' recovery from musculoskeletal injuries before and after improvement. After the implementation of the improvement plan, continue to evaluate if the improvement results are not good or deteriorate, the improvement methods and implementation measures should be re-selected, or their work should be adjusted, and the human hazard factors should be isolated to avoid secondary hazards.

Conclusions

All execution processes and results must be recorded in a documented form to facilitate the evaluation process. All planning and execution records should be kept for at least three years for future reference.

Contact: CHIA WEN Lai

Show Chwan Memorial Hospital
CHANGHUA, chd7203270@hcmh.com.tw

Preliminary study on the introduction of „Entrustable Professional Activities (EPAs)“ assessment in the Post-Graduate Year Training -Community Surgery Course

CHEN Hsiu-Yin, HUANG Yu-Wen, TSAI Shih-Chung, CHOU Yi-Wei, YANG Sheng-Yu

Introduction

With the reform of medical education, scholars have proposed competency-based medical education (CBME) to train doctors.

In order to be able to perform CBME, scholars have developed two teaching evaluation methods, one is a milestone; the other is entrustable professional activities. Because the object of this research is resident physicians who only have a one-month course after graduation from post-graduate year training program to community surgery, referred to as PGY, we adopted entrustable professional activities (EPAs) to evaluate the effectiveness of PGY learning.

Purpose/Methods

This study collected 5 PGYs who received community surgery training in our hospital from September 108 to December 109, and aimed at three EPAs: EPA-1 preoperative preparation for inpatients; EPA-2 the implementation emergency endotracheal intubation; EPA-3 wound suture in the operating room. The grading level is divided into Level 1 to 5. Except for EPA-2 which is qualified as Level 2, the remaining EPA-1 and EPA-3 are qualified as Level 3. PGY self-assessment and clinical teacher's grading are requested using the summary evaluation form.

Results

After the evaluation results are counted, the results are as follows: (1) The average score of the three EPAs PGY is 2.4~4.0 points, the standard deviation is 0.84~1.2 points, and the average clinical teacher score is 2.7~4.4 points, and the standard deviation is 0.6~0.84 points. (2) All three EPAs have achieved passing scores. (3) EPA-1 PGY self-evaluation and teacher evaluation scores > EPA-3 > EPA-2. (4) Analyze whether there is a difference between the scores of PGY self-ratings and the scores of clinical teacher assessment by independent t test. The results show that there is no statistically significant difference between the two ($p=0.095\sim0.724$, $p>0.05$).

Conclusions

The above results show that EPA-1 belongs to patient care. Therefore, regardless of whether the PGY self-assessment and clinical teacher evaluation are at Level 4, the performance of the students is relatively good, while EPA-2 and EPA-3 are technical aspects that require continuous Practice makes perfect. However, the three EPAs designed to better understand the strengths and weaknesses of PGY are in line with learner-centered medical education.

Contact: HUANG YU WEN

Tainan Municipal Hospital (Managed by Show Chwan Medical Care Corporation)
yyuwen@mail.tmh.org.tw

Education beyond Borders : Nursing and Midwifery Capacity Building in Eswatini and Myanmar

LIN Yuan-Wei

Introduction

Due to limited resources and poor connection between health facilities and communities, it is a challenge to improve maternal and infant health in developing countries. In accordance with the spirit of SDG 17, partnership for the goals, Chia-Yi Christian Hospital (CYCH) has worked with partners from Eswatini and Myanmar to conduct nursing and midwifery training for healthcare workers to strengthen their clinical knowledge and skills along with improving the quality of healthcare.

Purpose/Methods

CYCH cooperates with local institutes to Train the Trainers. Eswatini Ministry of Health co-organized the training to train doctors, nurses, and rural health motivators, and in Myanmar the partner is Myanmar Nurse and Midwife Association (MNMA). Courses and workshops about high-risk case management, antenatal and postnatal care, gentle birth, etc., were held in Taiwan, Eswatini, and Myanmar. All the participants trained would be able to go back to train or serve others.

Results

23 trainers have been trained in Eswatini who totally organized 31 local training sessions and train 1,029 trainees from 2017 to 2020. These trainees help to promote maternal and infant health including monitoring high-risk pregnant cases. In Myanmar, 43 participants attended a Birth Education Workshop in 2020. The average score increased from 31.7 to 96.3 for their pretest and posttest respectively. The trainees are willing to apply the skills to daily work and look forward to more training.

Conclusions

Working with local partners helps to conquer the barrier of languages and cultures, as well as to develop acceptable training courses and health promotion strategies for the public. Based on meaningful feedback and essential support from local government and institutes, CYCH successfully assist to improve the postnatal care rate in Eswatini from 22% to 82% and introduces the concept of gentle birth to Myanmar nurses/midwives with a course satisfaction rate of 100%.

Contact: LEE Pei Hsuan

DITMANSON MEDICAL FOUNDATION CHIA-YI CHRISTIAN HOSPITAL
60002 Chiayi City, cych13199@gmail.com

Poster Session 5: Monitoring, implementation and evaluation

A Study on Effectiveness in Patients' Fall Prevention with Innovative Movable Bed Rails

YANG Bey-Jing**Introduction**

"Fall" is one of the most common accidents in various medical institutions. It may cause varying degrees of physical and mental injury, ranging from bruises, fractures, intracranial hemorrhage and even to death. There are a total of 46 patients fell from January to September 2020 in the emergency department of a medical center in Northern Taiwan, which unit is also the one with the highest rate of fall. Among those cases, 5 caused moderate injuries during getting out of the bed from the gap at the end part. With the design of bed rails for all manual beds, similar incidents can be prevented from happening in future.

Purpose/Methods

To develop innovative movable bed rails to prevent the patients fall when they are getting out of the bed from the gap at the end part, and to improve the effectiveness of nurses' health education and to maintain patients' safety. There are no bed rails

at the end of the bed in general medical hospitals, while there are currently 6 styles of emergency bed gates. After discussing with the engineering office and many manufacturers, 6 existing bed rails have been made in consideration with the versatility and cost. The movable stainless steel U-shaped and P-shaped bed rails are suitable for the 6 given bed gates. Those bed rails are additionally installed with velcro in the case of patients who are at high risk of fall.

Results

Since 2020.12.10, the movable stainless steel U-shaped and P-shaped bed rails have been used, and they are currently used smoothly. There has been no patient falling from the gap at the end of the bed from January to February 28, 2020.

Conclusions

The application of innovative movable bed rails can provide fall prevention measures and maintaining patients' safety. It is worthy of promotion and usage to improve the quality of care. In the future, an integrated bed rail will be developed with automatic locking and safety control when the device is pulled up. The design will bring more convenience for clinical use.

Contact: YANG Bey-Jing

National Taiwan University Hospital.
Emergency Department, 100 Taipei,
miffy@ntu.gov.tw

Multiple strategies to reduce interruption of medication administration by nurses

CHU Mei-Ling, CHEN Yen-Ya, HUANG Bao-Hwa, CHANG Jung-Chen

Introduction

Between January 2017 and May 2019, there were 9 incidents of incorrect medication administration by nurses in one medical unit of a medical center hospital. Four of these incidents (44.4%) were associated with the interruption of medication administration. The interruption of medication administration was 85.2%. The major reasons of interruptions included inquiring the disease prognosis (29.4%) and talking with others (17.4%). The purpose of this study was to implement multiple strategies to reduce the interrupted medication-administration among nurses.

Purpose/Methods

On August, 2019, a questionnaire and field observations found the major reason for high-rate of medication-administration interruption was the low awareness toward non-interruption during medication administration. The insufficient knowledge and lack of adequate on-job training about the standard of procedures (SOP) to handle the medication-administration interruption were also observed. Multiple strategies were implemented, including warning lights, posters, videos, health education, instruction sheets, cards, training, handling of nonemergency medical needs by functional nurses, broadcast before medication administration, and charts and checklist for medication-interruption prevention and post-interruption handling processes.

Results

After the interventions implemented from September to December, 2019, the interruption rates of medication administration were 37.4% (15 incidents /74 observations), 9.6% (13/135), and 2.0% (1 incident / 49 observations) on October 2019, January 2021 and February 2021, respectively. The implementation of preventive interventions by nurses was increased from 80.9% to 97.1%, and the rate of adequate post-interruption management was increased from 63.8% to 100% after this project.

Conclusions

Application of the intervention measures may increase the awareness on medication-administration interruption among nurses, patients, and caregivers. The new nurses should be provided training on medication-administration interruption managements. The checks for the non-interruption of medication administration by nurses should be included in the routine quality assessment. The continuous advocacy and auditing can help maintain non-interruption of medication.

Contact: CHU Mei-Ling

National Taiwan University Hospital
100225 Taipei, 108069@ntuh.gov.tw

Prevention strategies for patients from falling and cross-disciplinary team to improve the effectiveness

LAI Fang-Tsu, CHEN Jesse, CHEN Yi Ching

Introduction

Falling incidents ranked second in the safety reporting ranking of adverse medical events in Taiwan in the past five years, accounting for 23 to 25% of total reported cases. Of these, falling incidents with injuries involved accounted for 52.2%; they might be serious injuries such as fractures or surgery-required that would affect the life quality of the patients. The integration of medical cross-disciplinary team assessment of the cause of the fall and strategy adoption is required in the measure of fall prevention.

Purpose/Methods

The fall prevention program promoted included: 1. Promotion organization: A cross-disciplinary fall prevention team was established. 2. Promotion strategy: (1) to provide safe caring environment of the fall; (2) to assess and reduce the falling risk; (3) after the fall, to inspect and adjust the caring plan; and (4) to implement fall risk assessment when the patient is discharged. 3. A safety reporting system was established and control figures were used monthly to monitor fall index. 4. Integrated quality enhancement activities were established to reduce fall incident rate. 5. Health education of fall prevention was promoted in the hospitals, the communities, long-term care services, and home services.

Results

According to our statistics from January 2018 to December 2020, there were a total of 256 cases of fall reports of the entire hospital. Among them, Elders aged 65 years old or above accounted for 56%. Based on the fall risk assessment, the high-risk group accounted for 77%. To sum up, the primary incidence cause is the patient's health factors, accounting for 56% (among

them, high-risk patients insisted on getting out of bed by themselves that accounted for 16%), environmental factors that accounted for 11%. The fall incident rate of inpatients decreased from 0.09% in 2017 to 0.07% in 2020.

Conclusions

In terms of the poor compliance rate of the patients for fall prevention and the aging society trend, it is suggested to strengthen the health education of fall events to the patients, their families, caregivers, and the general public of the community. Patients and their families should be encouraged to join the safety care of the patients.

Contact: CHEN Yi-Ching

Tainan Municipal Hospital(Managed by Show Chwan Medical Care Coporation)

70173 Tainan, yiching@mail.tmh.org.tw

The Study of Investigation on Outpatient Satisfaction of Ambulatory Pharmaceutical Services of Regional Teaching Hospital in North

LI Ling-May, LIN Ching-Feng, LUO Jiing-Chyuan

Introduction

The rapid development of medical care industry in recent years and the changes in health insurance policies. The patients pay more attention to their health and the quality of medical services that provided by medical healthcare institutions. Therefore the major task of hospital management is to improve the medical service quality. The satisfaction of outpatient on pharmaceutical service and know about the patient's expectations and demands, it is acted as an index to evaluate and improve pharmaceutical service quality.

Purpose/Methods

Through our literature review, we identified begin five dimensions-facility environment, waiting time, service attitude, treatment process and treatment safety to develop a structured structural questionnaire which we administered along with an outpatient questionnaire in a regional teaching hospital. A total of 347 valid samples were analyzed in 2019 to explore the change in the average value of the satisfaction study variables related to pharmaceutical services.

Results

The overall average satisfaction score was 76.62 (out of 100). Begin of the each dimension, patients reported the highest degree of satisfaction with "service attitude of pharmacist" (average score 3.92), followed by "drug label information and instructions" (average score 3.88), "waiting time for getting medicine" (average score 3.64), the scores are the highest in all dimensions, suggesting that the hospital and pharmacy had benefited from hospital attention to medical safety.

Conclusions

In conclusion, paying attention to medical safety can serve as the basis of medical service quality. The Pharmaceutical Department

aims to enhance IT equipment and hardware facilities in order to provide quality, personalized, and safe pharmaceutical services. Lastly, suggesting that governors in the hospital concern appropriate resource, for example, manpower and equipment, and pay more attention to the health care of children, women and the elderly in order to promote quality of clinical workers and promote satisfaction.

Contact: LIN Ching-feng

Keelung Hospital Ministry of Health and Welfare

chingfeng01@gmail.com

The Value of modified Burns Wean Assessment Program in adult intensive care unit: A Regional Hospital in Northern Taiwan

WU Jun-Long, HUANG Yan-Qiu, WU Tai-Lian

Introduction

Weaning from ventilators is not an easy decision for the intensive care unit medical team. However, earlier spontaneous breathing trial (SBT) is common consensus. This study is evaluate the weaning program that our team modified from Burns Wean Assessment Program, called m-BWAP, to predict if a patient is ready to weaning ventilator or not.

Purpose/Methods

We collected 200 patients who was intubated with ventilator. 100 patients for using m-BWAP to evaluate to try weaning. These patients also include 1. medical diseases 2. Surgical diseases. Our weaning program included 1. respiratory system 2. cardiac system 3. renal function 4. nutrition. If a patient get 8 points of total 16 points, the respiratory therapist (RT) choose a mode or T-piece for SBT. After 1-2 hours SBT, RT measure some data for weaning: 1. rapid shallow breathing index (RSBI) 2. Pi & Pe maximum. After measurements, the physician and the medical team make the decision that withdraw the ventilator.

Results

Among the 200 patients studied, 122 patients succeeded of weaning. Ventilation days was 5.52 ± 4.97 in using m-BWAP group and 7.75 ± 8.12 without m-BWAP group. (p -value > .01), no significance. However, the weaning rate is significant between this two group: in m-BWAP group is 70%; 48% in without m_BWAP group.

Conclusions

Although, ventilation days didn't have significant results after applying m-BWAP, the weaning rate gets better with m-BWAP. We still suggest that using m-BWAP as the standard operating procedure in weaning ventilator and the score proportion in some organ can be reconsidered. While trying SBT, we think the ICU team should help these patients do some breathing muscle power training to increase weaning chance. Further, a larger RCT can be considered to assess efficacy.

Contact: JUNLONG Wu

jerome890382@gmail.com

Reducing the X-RAY Routine Examination Retake Rate by PDCA

LIN Kuan-Yu, LIN Ching-Feng, LUO Jiing-Chyuan, LI Ling-May

Introduction

Radiation dose has always been a topic of concern to the public, routine x-ray examination is currently one of the most commonly used medical equipment to assist diagnosis in medical examinations. Reducing the retake rate can decrease unnecessary radiation doses received by patients. This study used the PDCA quality improvement method to analyze and improve the retake rate and promote the quality of medical services.

Purpose/Methods

This study collected about 110,000 routine x-ray examination images from January to December 2020, we obtained the retake rate and the most of reasons for retake by statistical analysis, then used the PDCA quality improvement plan to analyze and improve.

Results

The average retake rate was 6.79% from January to December 2020 by statistical analysis, and the top three retake reasons were the lack of image field, incorrect position and the patient was unstable (restlessness). PDCA was performed separately Quality improvement plan; after that the retake rate from January to March 2021 were 5.62%, 5.54% and 4.99%, respectively.

Conclusions

Based on the analysis results of the image quality team, a PDCA quality improvement plan was carried out for the retake rate problem. After the implementation, the retake rate has been significantly improved. The undergraduate will continue to monitor the image quality and improve the professional technical capabilities of radiographer to improve medical services quality, and can also reduce unnecessary radiation doses received by patients.

Contact: LIN Ching-feng

Keelung Hospital Ministry of Health and Welfare

201 Keelung, chingfeng01@gmail.com

A medical center improves the cleaning and packaging improvement plan of the Central Sterile Supply Department

CHEN Li-Lin, CHUANG Fu-Lien, SHU Mei-Lan, WU Chia-Jung, CHEN Jin-Shuen

Introduction

Effective high-level disinfection or sterilization comes from effective cleaning, so the supply center is responsible for monitoring effectual cleaning certification and providing safe medical equipment to serve patients. When the supply center

receives sterilized medical equipment from various units, it uses clean packaging and ATP test pass rate (<50 RLU) to determine the acceptance of medical equipment standards. Understands the effective cleaning and testing data to enhance the hospital colleagues' attention to the cleaning of sterilized medical equipment.

Purpose/Methods

Investigation record: From September to December 2019, the integrity checks and ATP test data were performed for monitoring sterilized medical equipment in the hospital. Integrity and ATP test pass rate averaged 75% and 67%. 1. Organize whole-hospital education and training. 2. Units discuss and improve. 3. Share the brewing and use of enzyme cleaners. 4. Purchase disposable items to reduce the labor and time required for repeated cleaning. 5. Make ATP inspection and cleaning operation process and record video.

Results

Statistics from 2020 to March 2021, 84 units in the hospital, a total of 1,850 sterilized medical equipment, clean packaging, and ATP testing values, the pass rate has risen from an average of 75% to 96%, and the pass rate of ATP testing has increased from an average of 67% to 81%, the progress rate was 28% and 20.9%.

Conclusions

After interventional measures, both the cleaning package and the effectiveness of cleaning have improved. The test found that laryngoscopes, manual resuscitators, mouth openers, the vaginal dilator can repeat disinfection in the emergency vehicle. The measured data is often higher than 50RLU. Therefore, in addition to education, training, and monitoring, using disposable items from the market can solve the incorrect packaging and cleaning.

Contact: WU Chia-Jung

Kaohsiung Veterans General Hospital, Taiwan
Kaohsiung, jalonewu@gmail.com

Environmental monitoring for SARS-CoV-2 on surfaces and in the air

PASTORE Elisa, SCARPINI Gian Carlo

Introduction

ASST Pavia annually carries out environmental monitoring within its hospitals, in order to track the progress of certain occupational risk factors. With regard to biological risk, monitoring has always been executed on surfaces and in the air to determine the microbial load in areas at greatest risk. The COVID-19 emergency made it appropriate to increase these types of monitoring.

Purpose/Methods

During the COVID-19 emergency, despite ASST's hospitals weren't adapted to structural and plant requirements for infectious patient management, it became necessary to handle large COVID-19 patients flows. Therefore specific areas within the hospitals were identified for COVID-19 patients and an attempt was made to adjust them for proper patient management, ensuring the operator safety. For 2021, in two ASST's hospital identified as COVID-19 hub, have been programmed specific determinations of SARS-CoV-2

contamination on surfaces and in the air in units at high risk, like E.R., intensive care, medicine and surgery.

Results

The monitoring scheduled for the year 2021 has yet to be started, however extraordinary monitoring have been carried out following the sanitization of COVID-19 areas. These monitoring made it possible to ascertain the correct sanitation of these areas and to resume the activities ensuring the operator and patient safety.

Conclusions

It is expected that the determinations of SARS-CoV-2 contamination on surfaces and in the air in the COVID-19 Hubs, can significantly contribute to the health and safety of operators and patients, allowing the continuation of activities after checking the effective efficacy of the environment sanitization processes.

Contact: SCARPINI Gian Carlo

gian_carlo_scarpini@asst-pavia.it

Implementation of hospital clean by using cleaning tools with color separation management system to reduce the incidence of drug-resistant organisms.

CHEN Jane-Lin, HO Yu-Mei, YANG Tsung-Yen, CHEN Hui-Lan, YAU Wen-Jen, LIN Ching-Feng, LUO Jiing-Chyuan, LI Ling-May

Introduction

Drug resistant bacterial infections (DRBI) in hospital is a global problem as it increases the patient's morbidity and mortality. Inappropriate hand hygiene and environmental cleaning (EC) are the major cause of increasing DRBI and now EC is the one important issue in hospital institutions. In 2018, the incidence of DRBI in our hospital is 6.71% and only 30.56% reached the correct disinfection of hands and environment after implementation of comprehensive infection control program.

Purpose/Methods

We arranged a training program for all the cleaning staffs regarding EC measures by using cleaning tools with color separation management (CSM) for easy identification of these cleaning equipment. Established standard operating procedures and periodically assess for correct implementation of environmental cleaning process.

Results

After implementation of CSM from January 2019 to November 2020, we found that the correct disinfection rate across the wards increased from 30.56% to 84.21% and the incidence of DRBI decreased from 6.71% to 4.74%.

Conclusions

By combining education and implementation of effective strategies for EC and disinfection in hospital setting reduce the healthcare-associated infections (HAIs) as well as improve the

quality of health care environment. Therefore, the development and implementation of hospital clean is becoming increasingly important to reduce the incidence of DRBI, to promote patient safety and quality of health care.

Contact: LIN Ching-feng

Keelung Hospital Ministry of Health and Welfare
201 Keelung, chingfeng01@gmail.com

Tamsulosin's prescription changes in women due to health insurance policy

LIU Chun-Sheng, WU Chi-Wen, LIN Ching-Feng, LUO Jiing-Chyuan, LI Ling-May

Introduction

The approved indication for the urinary drug Tamsulosin is only benign prostatic hyperplasia, but it is often used clinically for non-approved indications. Therefore, the Taiwan National Health Insurance Administration issued an announcement in April 2018 and did not pay for non-approved indications. Especially the use of women, this study wants to understand the changes in the prescription pattern of women for using Tamsulosin after this announcement.

Purpose/Methods

In this study, women, who had prescribed Tamsulosin in outpatient clinics from January to August in 2018, continuously used Tamsulosin for more than 28 days. Moreover, it was tracked their prescriptions from May to December 2018. Finally, it was used Excel 2007 to analyze their age, department and prescription pattern.

Results

A total of 240 people were included in the study. The main departments were 183 (76.3%) in urology, followed by 25 (10.4%) in endocrinology, 15 (6.3%) in nephrology, and 184 (76.7%) who used Tamsulosin 0.2mg, 56 (23.3%) who used Tamsulosin 0.4mg. After prescription change, a maximum patients used Terazosin of 86 (35%). Patients themselves own expensing Tamsulosin was 32 patients (13.3%), and 102 people (42.5%) who have not used related drugs again.

Conclusions

Accordingly to the results, the main groups are elderly, and the prescriptions are converted to similarly mechanism drugs (Doxazosin and Terazosin). However, these have higher vascular side effects such as hypotension or edema than Tamsulosin and the side effects can also be more dangerous in the elderly, and we are hoping to be reopened for safer Tamsulosin. There are quite patients who have not taken the relevant drugs again, showing that there are indeed but using the drug.

Contact: LIN Ching-feng

Keelung Hospital Ministry of Health and Welfare
201 Keelung, chingfeng01@gmail.com

Evaluation of adjustment failures and improvement processes in a teaching hospital in a certain area of northern Taiwan

LIN Hui-Lan, LIN Wen-Jye, CHU Wan-O, LIN Ching-Feng, LUO Jiing-Chyuan, LI Ling-May

Introduction

There are 835 items of medicines in this hospital. The pharmacists often make mistakes in prescriptions due to various reasons. The department arranges patient medication safety meetings every month to discuss adjustment errors and improve the process. Through the meeting to promote, adjust the label of the drug name on the drug bag, or change the location of the drug, so as to increase the warning to reduce the error rate of dispensing.

Purpose/Methods

This study focuses on the improvement of the departmental adjustment miss in a northern regional teaching hospital from January 106 to December 109, including: adjusting the labeling of the drug name on the drug bag, or the change of the drug location, analysis and Review.

Results

The average number of adjustment error per month was 10.42 (0.05%), and the number of changes was 1.58 (16.23%), including 76.09% of the change in the name of the medicine bag (change of the capitalization of the drug name 13.04%, add the Chinese name or effect of the drug 39.13%, add of the color 19.57%, add dose 4.35%), change the position of the drug 13.04%, and other 10.87%. There were 4 cases where the same error occurred again.

Conclusions

This study confirmed that the courage to report, review adjustment errors, and improve the process in time can reduce the error rate of adjustments, and also greatly reduce the occurrence of the same errors, which will help improve the quality of patients' medication and the safety of patients' medication. Adjusting the wrong way to improve is here for reference to related industries, and hope to establish a safe medication environment together.

Contact: LIN Ching-feng

Keelung Hospital Ministry of Health and Welfare
201 Keelung, chingfeng01@gmail.com

Application of Leukocyte-Reduction Red Blood Cell to improve the safety of blood transfusion

TU Chi-Chao, WANG Jyn-Yeong, LEE Yun-Yi, LEE Pei-Ning, WU Meng-Ting, WU Tung-Huan, LIN Ching-Feng, LUO Jiing-Chyuan, LI Ling-May

Introduction

Leukocytes are one of crucial factors to cause transfusion reactions and potentially transmit cytomegalovirus. The average of blood transfusion reaction rates in our hospital from 2015 to 2017 was 0.38%, 0.30%, and 0.42%. We aim that prevention of transfusion infections, decrease in the rates of transfusion reactions and improvement of blood quality and transfusion safety, so we start the policy of pre-storage leukocyte reduction from April 2018.

Purpose/Methods

(1) We announced establishment and application of red blood cells leukocytes reduced (LR-RBC) system to physicians at hospital conference; (2) With big data of antibody identification, we established inventory of LR-RBC; (3) We hold transfusion reaction-related education training; (4) using a qualified warm blood device and regular testing and verification by a professional person; (5) recommending that patients be informed with any symptomatic situation.

Results

(1) The rate of using LR-RBC was 53.82% in 2018, and the averages of using LR-RBC was 87.77% in January to November 2019; (2) We establishment of weekly inventory of E+C+Mia(-) A/B/O LR-RBC; (3) We hold conferences in transfusion medicine to share applications of LR-RBC; (4) Biomedical engineers perform regular maintenance at each wards; (5) Before and after transfusion, patients should be observed. We compared 2018 (0.25%) and 2019 (0.11%, January to November) transfusion reaction rates, it greatly decreased 0.14%.

Conclusions

The promotion of the application of LR-RBC and the inventory of antibody identification strategies, the using rate increase 33.95%, and can reduce non-hemolytic transfusion reactions, shorten days of in hospital of patient, reduce the rate of transfusion reactions, and ensure the safety of patients' blood transfusions. In addition, reducing waste of medical costs and improving operational efficiency of blood transfusion for medical staff.

Contact: LIN Ching-feng

Keelung Hospital Ministry of Health and Welfare
201 Keelung, chingfeng01@gmail.com

Improving Critical Value Confirmation and Disposal Efficiency with Continuous Quality control Index Monitoring

TU Chi-Chao, LEE Pei-Ning, WU Meng-Ting, WU Tung-Huan, HUANG Liang-Sheng, HUANG Xin-Yi, LIN Chin-Feng, LUO Chyuan Luo, LI Ling-May

Introduction

In cases where examination values are critical, the clinician must be notified immediately and provide medical care for patients. Our hospital set up "automatic notification and response function system for critical value", there is still room for improvement. The purpose of this project is to use quality indicators in order to monitor continuously, enhance the effectiveness of communication between medical care personnel, and to improve the effectiveness of the transmission and response of critical value reports.

Purpose/Methods

Establish a backup system for the emergency notification and response system of emergency value and implement dual-track implementation. The Critical value reports of the out-patient department are : (1) Automatically sent via text messaging to physician for notification and response and (2) Paper-based notification for reply. 10 cases are chosen monthly to ensure treatment records, follow-up response rates and the treatment rate are all within parameters. Results of the samples are reported at the hospital's meeting monthly.

Results

From 2015 to 2019, the confirmation rate of the hospital's critical value notification was 97.64%, 98.42%, 98.66%, 98.81% and 98.81%, respectively. In 2019, growth rate was negligible due to ward renovation. The follow-up response rates for out-patient critical value notifications during the period 2015 to 2019 were 99.00%, 99.49%, and 99.94%, 100% and 100%, respectively. Both physicians and nursing staff responded as soon as possible.

Conclusions

This research project uses a dual-track (digital and paper-based information) to improve patient safety. At the same time, medical examination colleagues can understand the difficulties in the implementation of clinical work by doctors and nurses, and test the clinical treatment methods of critical values. It is expected that the system will continue to meet the needs of the users to improve the medical quality.

Contact: LIN Ching-feng

Keelung Hospital Ministry of Health and Welfare
201 Keelung, chingfeng01@gmail.com

Evaluation of Significance of Tuberculosis-Interferon Gamma Release Assay in Injecting Drug Users in a Northern Regional Teaching Hospital in Taiwan

TU Chi-Chao, LEE Pei-Ning, HSU Hui-Fang, WU Meng-Ting, WU Tung-Huan, YANG Ya-Chi, LIN Ching-Feng, LUO Jiing-Chyuan, LI Ling-May

Introduction

Diagnosis and interventional treatment of latent tuberculosis (TB) infection (LTBI) are important methods in tuberculosis control. TB- Interferon-Gamma (IFN- γ) release assay (IGRA) tests have the characteristics of short time, high specificity, and high sensitivity and allow rapid screening of primed memory T-cells immunity in response to antigen. However, systematic studies regarding the epidemic of LTBI are still rare in northern Taiwan. We aimed to assess the prevalence and factors associated with LTBI based on the results of a domestic TB-IGRA

Purpose/Methods

A retrospective study was carried out on positive TB-IGRA patients who were infected with TB and diagnosed at our hospital from January 2019 to November 2019 and individuals with active TB or a history of TB were excluded. 161 injecting drug users met the requirement and were analyzed in this study. The TB-IGRA, routine blood test, T-cell subgroup data were collected for statistical analysis. The TB-IGRA was performed for diagnosis of LTBI.

Results

50 (31.06%) had a positive result, and positive rate gradually increased with age ($P < 0.001$). Statistics analyses showed that increasing age, male gender and a history of TB exposure were risk factors associated with LTBI. TB-IGRA results were in positive proportion to the lymphocytes, CD4+ T cells and CD4+ CD28+ T cells, whereas negative to the Treg cells.

Conclusions

After the stimulation of TB-specific antigen, the proportion of CD4+ IFN- γ and CD8+ IFN- γ T cells were both increased and the CD4+ IFN- γ T had positive correlation with the value of TB-IGRA. This study further expands the application scope of TB-IGRA technology in the diagnosis of TB and lays a foundation for clinical practice to understand the immunity state of the patients with TB and the application of auxiliary clinical immunity regulators.

Contact: LIN Ching-feng

Keelung Hospital Ministry of Health and Welfare
201 Keelung, chingfeng01@gmail.com

The Project of Reducing the Medication Errors in Hemodialysis Room

LIN I-Chen, CHANG Yi-Hsiu, WU Chun-Kuei, HUANG Mei-Ling, TSAN Chin-Yuan

Introduction

According to Joint Commission of Taiwan Patient-safety Reporting system in 2020 Q4, medication errors were the most frequent events (30.0%). Besides, human errors cause the most of them, following by working condition and process design. Although electronic medical records (EMRs) solve hand-writing and time-consuming problems, they also bring new problems such as human-machine interaction errors. In 2020, our unit reported 5 cases of medication errors. Most of them were related to working process design related to EMRs.

Purpose/Methods

We used Plan-Do-Check-Act cycle and team resource management. We found that the problems: 1. The Hemodialysis System and Portal systems are not well connected. 2. The function of HDS system page was insufficient. 3. The medication administration procedures on HDS were inadequate. 4. The management mechanism of regular medication was insufficient. The strategies were: 1. Prescribe only in Portal System. 2. Constructing independent fields for medication administration procedures on HDS. 3. Strengthening the management protocol of drug requisition. 4. Repair the management mechanism of regular medication.

Results

In 2021 Q1, our medication error is zero and correct administration rate increased from 84% to 100% reaching our aims.

Conclusions

EMRs of HDS are essential for quality improving. Establishing a detailed EMRs could optimize hemodialysis treatment course and connection between physiology parameter and health index. It will help us monitor the patients' health, improve care quality and even prevent medical errors effectively.

Comments

Human makes errors. We need to use a systemic and informatic way to prevent human errors. By process improvement project, we can analyze and solve the problems including culture problems, work problems and resource problems. Furthermore, using inter-department meetings supported by our top management, we modified our work process in administration. The last, we suggest more intensive quality improvement project in hemodialysis room to solve the administration and medication monitoring such as Electric Barcode Check System.

Contact: ICHEN LIN

National Taiwan University Hospital Yunlin Branch
632 Yunlin, a6338118@gmail.com

Oral Hygiene Care strategies on the occurrence of ventilator-associated pneumonia (VAP) in ventilated patients: a best practice implementing project

CHANG Cheng Yu, LIN Ciao Han, CHEN Guan Ting, LIN Gan Fang, LAI Ying Juan

Introduction

The need for endotracheal intubation and mechanical ventilation increases the risk of ventilator-associated pneumonia (VAP). Previous empiric studies have confirmed that VAP is associated with prolonged hospitalization, increased health care costs, and mortality. There were three months occurs VAPs at the chronic respiration ward in 2018. The study compared the incidence of ventilator-associated pneumonia (VAP) among patients treated with oral hygiene care strategies.

Purpose/Methods

We conducted a prospective study in a chronic respiration ward of 30 ventilated patients. Patients in the study group received oral hygiene care strategies regimen that involved tooth brushing, suctioning, sodium bicarbonate, rinsing with an antiseptic solution containing 1.5% hydrogen peroxide, and a mouth moisturizer. Using the chlorhexidine-containing mouth rinse or gel in adult critically ill patients. The patients in the control group received usual oral care that included cleaning with tooth brushing and suction.

Results

Among the 30 patients admitted to the chronic respiration ward, 3.3% of the study group developed VAP compared with 10.0% of the control group ($p < 0.002$). According to the Centers for Disease Control and Prevention, oral hygiene is one of the most important strategies for preventing VAP.

Conclusions

Based on the results, ventilated patients using oral hygiene care strategies regimen that includes tooth brushing, suctioning, and rinsing with an antiseptic effectively prevent VAP than more conventional protocols. VAP is a potentially severe complication in these patients who are already critically ill. Implementation of oral care protocols and nurse education programs reduced VAP.

Contact: CHANG Cheng-yu

National Yang Ming Chiao Tung University Hospital
260 Yilan, julie3717@gmail.com

Reduce Incidence of Drug-related Incontinence Associated Dermatitis in the Liver Disease Patients

HSU Tse-Pin, CHANG Kai-Ting

Introduction

Patient with liver failure and hepatic-renal syndrome were easily occur incontinence-associated dermatitis (IAD), that was caused

by using Lactulose or Terlipressin treatments. The incidence of drug-related IAD was as high as 37% during 5month (January to May, 2019). The purposes of this study were to implement an integrative project to reduce the incident IAD for patients with liver failure and hepatic-renal syndrome in a medical unit.

Purpose/Methods

A prospective study was carried out in a medical unit. Although the causes of IAD were complex, several major causes of high incident IAD were identified, such as lack of standard operating procedures, not enough preventive measures, insufficient health education provided to the patients, and the use of skin-protective products untimely. In addition, the nurses had insufficient knowledge of IAD nursing care. After consensus, a reasonable goal of quality improvement was to reduce the incident IAD down to 23.5%.

Results

Several feasible strategies were implemented, including designing staging chart and reminder card, providing instructions for health education. Developing the standard operating procedures and educative trainings to nurses were also successful. An evaluation on nursing care knowledge was concurrently applied to address early screening of patients at high-risk of IAD and providing protective materials in a timely manner. The incidence of drug-related IAD was 17.8%. Moreover, the proportion of stage-2 IAD decreased from 69.2% to 12.5%. A medical cost decreased 71%.

Conclusions

The development of standardized skin care procedures for IAD and the improvement of nurses' awareness effectively reduce the incidence of drug-related IAD. It can also relieve pain and discomfort of patients. Because of the significant cost-effectiveness, it is recommended to apply such integrative, multiple aspects nursing care to prevent and to reduce the incident IAD so that the quality of nursing care can be superior.

Contact: TSAI Pei-Fang

National Taiwan University Hospital
10002 Taipei, s900499@gmail.com

Applicating Aromatherapy to Reduce Odor of the Malignant Wound of Head and Neck Cancer can Improve Patient Self-esteem and Care Quality

TSENG Tzu-Wei, PAN Hsiu-Fang, KE Ya-Yon, SHEN Yu-Hua, WEI Yi-Lun, WU Mei-Chuan

Introduction

This ward treats patients with oral surgery. The odor from malignant wounds of head and neck cancer affects the patient's self-esteem. It is also an unpleasant experience for family members and medical staff who take care of patients. So it triggers trying aromatherapy to improve its smell.

Purpose/Methods

Air purifiers and aromatherapy machines are placed in the ward of patients with head and neck cancer to provide patients with

essential oils. The atomization principle of water aromatherapy machines is used to form small molecules and diffuse in the air to purify the air.

Results

From 01/2019 to 10/2019, the application of fragrant therapy in head and neck cancer ward reduced malodor, improved patient self-esteem and care quality satisfaction. Through the patient satisfaction survey, satisfaction increased from 70.23% to 90.6%.

Conclusions

The application of fragrant therapy in the head and neck cancer ward can significantly reduce the malodor, improve the air quality of the ward and the quality of care, improve the family's response to the malodor, and shorten the distance of the patient to be cared for, and improve the patient's self-esteem Situation.

Comments

The application of fragrant therapy in the head and neck cancer ward reduces malodor, improves patient self-esteem, and improves care quality satisfaction. It is recommended to promote it to other medical institutions for common reference.

Contact: HSU Jason

Chang Bing Show Chwan Memorial Hospital
Changhua, showchd@gmail.com

Preliminary study on the effectiveness of applying adjustable hot compression arm sleeves on the arteriovenous fistulas in hemodialysis patients

WEI Syu-Jhen, CHEN Shu-Chen, HSIEH Li-Hua, HUANG Li-Ching, CHEN Shu-Nuen, TSAI Yi-Fan

Introduction

Our unit is a hemodialysis center of a regional hospital in Taipei, Taiwan. From January to March 2019, the arteriovenous fistula obstruction rate was 8.75%. The Patients need to apply heat to the arteriovenous fistula before hemodialysis. In clinical practice, the patient or family member must always fix the heat pack with the other hand. Our research aims to maintain the good blood flow function of arteriovenous fistula and increase the quality of care by adjusting the hot arm wrap.

Purpose/Methods

The study period is from April 2019 to December 2020. After discussion with members of medical team, the cross-shaped helmet inside lining was used as the base of fixing belt and the sleeve was sewn on the base. The width should be greater than the maximum length of arm circumference, and an adjustable hot compression arm sleeves is designed. Then put hot pack in the cuff and fix it to the arm of arteriovenous fistula to increase patient's compliance with hot pack.

Results

A total of 150 patients with arteriovenous fistulas for hemodialysis were received. Our research results found that the

occlusion rate of arteriovenous fistulas decreased from 8.75% to 2.50%, patient compliance increased from 57.5% to 90%, and satisfaction was increased from 62.5% to 100%.

Conclusions

We found that through the adjustable hot compress arm sleeves perform thermal compresses on patients with arteriovenous fistulas during hemodialysis. Patients' activities still performed during the hemodialysis period without affect daily activities and work and increase patient compliance and reduce the rate of arteriovenous fistula obstruction. Finally, it could improve communication and improve patient and families' satisfaction.

Contact: TSAI YI-FAN

Taipei City Hospital, Young Ming Branch, b1717@tpech.gov.tw

Applying a case management modal to improve self-care cognition for myeloproliferative neoplasms patients

CHEN Wei-Hui, LIN Shu-Hui

Introduction

The common symptoms of myeloproliferative neoplasms are bleeding, thrombosis, and the risk of transforming leukemia. In a recently survey in our hospital, it showed that of the myeloproliferative neoplasms patients in our hospital have a low self-care cognition(56%), the lack of health education tools and a case management. These situation, which caused higher leukemia transformation rate in our hospital, triggered the establishment of the task team.

Purpose/Methods

(1)Implement the health education operating standards of the cancer case manager (2)Design the health education manual and actively provide the patients (3)Management system information and single consultation hotline (4)Organizing on-the-job education courses for nurse

Results

From August 1, 2020 to September 31, 2020, we evaluated 75 patients with myeloproliferative neoplasms, as a result, the patient's self-care cognition increased from 56% to 88%. And then, the satisfaction with health education increased from 2.2 points before improvement to 4.5 points. In addition, it is clinically continuously evaluated that under this mode of care, the patient's self-care cognition rate maintains an average of more than 80%, and the nurses can also internalize standard health education tasks into routines.

Conclusions

We deployed a cancer case manager, produce health education manuals, and setting up a monitoring system for cancer case management and consultation lines. After the improvement of the project, it reaches 88%, which will also increase the satisfaction with health education. Therefore, it is recommended to extend to all patients with myeloproliferative neoplasms to improve the quality of life.

Contact: WEN HUI, CHEN Chen

EDAH, 824 Kaohsiung, enjoy_free@hotmail.com

Poster Session 6: Accessibility of services

The promotion of integrated care in outpatient clinic to improve the safe use of medication for patients with chronic diseases

FAN CHIANG Yu-Chen, HSIEH Hui-Hsia, LIU Hui-Ling, TSENG Meng-Chuan, CHIEN Sou-Hsin, CHUANG Shu-Ting

Introduction

With the advancement and development of medical care, the elderly population and the number of people suffering from various chronic diseases have also increased simultaneously. With specialized medical care, patients with chronic diseases often require multidisciplinary visits. This not only consumes more visit time, it also increases the risk of repeated medication or drug interaction. If the same doctor can integrate medication for chronic patients, this will greatly increase the medication safety for them.

Purpose/Methods

In order to promote integrated medical care, a number of measures were taken. 1. Holding discussion meetings to improve the medical team's consensus. 2. Making posters to increase patient awareness. 3. Including the outpatient clinic description in the clinic hour table. 4. Showing up on screen medications used by patients with multidisciplinary visits to remind the physician to integrate patient's medication. 5. Providing rewards to support physicians. 6. Pharmacists provide medication-use evaluation for patient with complex medication combination.

Results

A total of 498 patients have completed the integrated care. The average number of patients in multidisciplinary departments dropped from 3.2 to 2.7. Pharmacist suggested that the adjusted ratio of drugs should account for 6% of the total.

Conclusions

Some chronic patients due to clinic department or disease attributes (such as ophthalmology and dementia) need specialized diagnostic test and medication and the patients' visits to the doctor differ, hence it was not easy to achieve a complete integration. However, it is worthy to continue the promotion of integrated medical cares as it can help reduce the number of patient visits in outpatient clinics, decrease the number of prescribed medicine and increase the safety of patient's medication.

Contact: FANCHIANG Yu-Chen
Buddhist Tzu Chi Medical Foundation
Taichung City, df173536@tzuchi.com.tw

The Study of The Impact of Experiential Value and Loyalty in a Community Hospital of Southern Taiwan

KO Yi-Tsen, CHUNG Yong-Chuan, LIN Li-Long, TSAI Wei-Chi, LEE King-Teh

Introduction

With the changing of the times, the accessibility and convenience of medical care are enhanced year by year, and medical institutions do not only have to pay attention to the business model of medical profession, but experiential value is also considered an important factor in market competition. This study will mainly explore the relevance among experiential value and patient loyalty with community hospitals.

Purpose/Methods

This study has employed cross-sectional configuration of questionnaire survey for investigation, taking patients of a community hospital in Kaohsiung as its subjects of research. In total, 205 valid questionnaires were released. Descriptive statistics, Pearson correlation coefficient, and complex regression analysis are used to explore their relevance and influence.

Results

The results of this study show that experiential value has a positive relationship with patient loyalty, while patient satisfaction ranks in the experience value score ranking are the highest score of service excellence. Since the emphasis in the medical industry is on the value of medical services, Shows that the Service Excellence of the services the subjects received is higher than Consumer Return on Investment, Service quality is higher than Consumer Return on Investment.

Conclusions

This study has found that the higher the value of experience, the higher the patient loyalty. The research in the hospital of this area, to increase the willingness and loyalty of patients to return to diagnosis, the medical industry must to establish outside the medical profession to make patients feel comfortable in different aspects of the mind when receiving medical services.

Contact: YITSEN Ko
Kaohsiung Municipal Siaogang Hospital
812 Kaohsiung, shomange@gmail.com

Diversification of outpatient services

TSAI Yi Shan, LIANG Li Fang, WANG Shi Han, CHEN Kuan-Hung

Introduction

Digital Era is upon us, and the application and development of AIOT, hospital facing transformation into a medical center, providing diversified payment and services as the primary policy and objective.

Purpose/Methods

Set up Self-service payment machines, E-health pay app, Self-verify machines for pick up the medication of continuous prescription for chronic diseases, Registration app, Touch-type Self-service registration machine, Inspection report inquiry machine, and outdoors service for the medication of continuous prescription for chronic diseases, we promote through videos, DM, outpatient building signboard, and Service staff/volunteers to directing and teaching patients, providing patients with convenient and fast service.

Results

Self-service payment machines and E-health pay app usage rate has increased from 13.54% to 37.2% from January 2019 to April 2021. Self-verify machines for pick up the medication of continuous prescription for chronic diseases usage rate has increased from 16.4% to 37.5% from January 2019 to April 2021. The Number of items for outdoors service for the medication of continuous prescription for chronic diseases has increased from 1252 to 2512 from April 2020 to April 2021.

Conclusions

Diversification of outpatient services not only make it easier for patients to seek medical treatment, but also relieve the congestion and staff pressure of counter queues and shorten them Waiting times can also enhance patient satisfaction and hospital competitiveness.

Contact: LEE Pei Hsuan

DITMANSON MEDICAL FOUNDATION CHIA-YI CHRISTIAN HOSPITAL

cych13199@gmail.com

Application of multimedia health education to improve self-care effect after cataract surgery in outpatient department

CHANG Su-Feng

Introduction

Cataracts are one of the main causes of vision disorders worldwide. Surgery is the only option to treat cataracts. Postoperative care is the focus of the medical team. However, during the global COVID-19 pandemic, in order to avoid group infection, we provide multimedia health education videos and telephone consultations to replace the past face-to-face group health education activities.

Purpose/Methods

In this study, convenient sampling was taken at the ophthalmology clinic of a medical center in Taiwan, from March 1 to April 30, 2021. First, make a complete series of videos. By using multimedia to broadcast real-time and convenient, and attach the video QR Code to the pre- and post-operative health education list, patients can scan the QR Code with any mobile device to watch it anytime, anywhere, and then improve the quality of care after cataract surgery.

Results

A total of 200 patients participated in this study. The multimedia health education videos were used to perform a test to complete

the effectiveness evaluation. After the surgery, the patient's knowledge of eye care reached 98.5%, and the patient confirmed that the postoperative eye medication method had a complete understanding of 100 %; The patient can correctly perform surgical eye care skills up to 98.5%. After the patient scans with a smart mobile device, he provides postoperative health education information anytime and anywhere. 90% of the patients expressed their willingness to use it, and the other 10% had no smart mobile device. (The average age is 70.8 years). In addition, a questionnaire survey of 12 physicians in the Department of Ophthalmology responsible for the implementation of the group health education guidance process showed that 100% of physicians can save the time for instructing patients to change their own dressing, shortening from 20 minutes to 5 minutes ($P<0.05$), the overall process can be simplified and the efficiency of postoperative guidance for outpatients can be increased.

Conclusions

During the global COVID-19 pandemic, the multimedia health education model may be effectively used to teach postoperative cataract patients in outpatient department.

Contact: CHANG Su-Feng

National Taiwan University Hospital

judice.chang@gmail.com

Preliminary Effectiveness of Taipei Public Hospital Promotion of Home Services

TSAI Yi-Fan, HO Hsuan, YANG Ya-Ting, CHEN Sung-Yun

Introduction

The coverage rate of long-term care (LTC) services for the elderly disabled in Taiwan has increased from 2.3% in 2008 to 15.42% in 2017. A total of 55,958 people are required long-term services in Taipei in 2018, but home services are still seriously inadequate. We hope to establish the first public hospital with a home service center in Taipei which to understand the demand for home services and estimate the coverage rate of LTC services in Taipei.

Purpose/Methods

During the study period was from January to November 2019, our strategies as follow: (1) Establish a home service center. (2) Provide 20 items of home services such as meal care, assistance in bathing and shampooing, Back tapping and change position, body and joint activities, accompanying go out, housework assistance, purchasing broker or collection or delivering and assisting in body cleaning. (3) Count the number of home service items and calculate the coverage of long-term services.

Results

During the study period, a total of 706 people and 1743 person-times were be served. Among them, housekeeping assistance were 17.96%, accompanying go out were 16.52%, assisted bathing and shampooing were 15.43%, escort service were 11.42%, body and joint activities were 10.67%, purchasing broker or collection or delivering services were 4.93%, and assisting in body cleaning were 4.19% etc., accounting for 80.22% of home

service items, accounted for approximately 1.26% of the coverage rate of LTC services in Taipei.

Conclusions

The results of our study show that elderly people with disability provide assisting in body cleaning, and assist in daily life including housekeeping assistance, accompanying go out, body and joint activities, purchasing broker or collection or delivering services all of these are focal point of home services.

Contact: TSAI YI-FAN

Taipei City Hospital, Young Ming Branch
10453 Taipei, b1717@tpech.gov.tw

Poster Session 7: Digitalization in health care and health promotion

Discussion about the effectiveness of community nurses' escort service program by accompanying people to seek medical care

CHAN Hsin-Lung, HUANG Tsu-Hsueh, LI Pei-Chia, TSENG Min-Hua, LI Yu-Meng

Introduction

When performing community screening or health promotion and education, the volunteers and nurses at community services provide referrals and make appointments for people with medical needs. Community nurses will provide escort services for those who visit the hospital for the first time. This project is to explore the effectiveness of our community nurses' escort service program. We hope that through warm companionship, one's anxiety can be reduced and smooth the process of those seeking medical care.

Purpose/Methods

The community nurses will accompany people to the clinic, complete the consultation and treatment process, educate about proper medication use, and give daily life precaution tips. In addition, the nurses will provide our center's consultation service hotline and have the patients fill out our "referral medical service satisfaction questionnaire". The nurses will track the patients' post-consultation status by phone one week after their visit to the hospital. Meanwhile, the nurses will complete the referral and escort record.

Results

From 2017 to 2019, the total number of referrals was 1057; 16% of the people received escort services; 58.4% were women and 57% were seniors over 65 years old; 52.6% were referred from health service stations and most referrals was to internal medicine (36.2%). The average satisfaction rate for escort service was 99.6%. The most satisfied items were soothing the elder's uneasy mood and feeling respected.

Conclusions

The public holds the community nurses' escort service in high regard. By accompanying people to seek medical care, it can soothe the elders' emotions and let them feel respected. Therefore, this service is worth promoting because it helps the elderly in Taiwan to have a happier life.

Contact: LI YuMeng

MacKay Memorial Hospital TAMSUI BRANCH
25160 New Taipei City, nana005415.D998@mmh.org.tw

Interweaving the Power of Community and Technology – Cloudify Health Stations in Communities

CHAN Hsin-Lung, HUANG Tsu-Hsueh, HSU Chih-Hung, LI Yu-Meng

Introduction

In order to implement health promotion, MacKay Memorial Hospital cooperates with community associations nearby to establish Health Stations. Local volunteers collected over 50,000 measurements of blood pressure, body mass index (BMI) and waist circumference each year. For the purpose of assisting the community to improve self-care ability and upgrading the services of Health Stations via technology, we begin to cloudify Health Stations.

Purpose/Methods

First and Second year, we built the framework for the cloud system and expanded the scale of the cloud stations at a rate of 4 stations per year. Following, we synchronized the data to the hospital, developed an exclusive health APP and initiated a case management system for health stations and medical staff. Annual goals included recruitment of 350 members per year, APP download rate of 10%, APP satisfaction rate of 80%, and case management system satisfaction rate of 85%.

Results

As of 2020, there were 25 cloud Health Stations (3.6 stations per year) and 3,193 registered members (456 per year). We were also on schedule with synchronizing data to the hospital system and developing both an exclusive APP and a case management system. APP download rate was 20.6%. User satisfaction rate for APP and case management system were 83.9% and 87.8%, respectively. The service volume of cloud stations had already reached 53.2% of the total volume (94,564) in 2020.

Conclusions

Cloudifying Health Stations drastically reduced the burden and error of keeping measurement records. Use of APP to check measurement data allows community residents to improve self-care ability. Medical staff members are also able to make suggestions on health management for community residents through synchronized data. Furthermore, the successful model of cloudifying Health Stations creates a new milestone for our hospital in health promotion.

Contact: LI YuMeng

MacKay Memorial Hospital TAMSUI BRANCH
25160 New Taipei City, nana005415.D998@mmh.org.tw

A regional teaching hospital in the north uses information system to improve the number of medical imaging inquire pieces(cross-hospital)

YAO Chiung-Fang, YANG Fu-Ying, LIN Ching-Feng, LUO Jiing-Chyuan, LI Ling-Mei

Introduction

In order to avoid duplication of examinations, reduce unnecessary waste of medical resources, and encourage hospitals to upload inspection results and medical images to the medical cloud information sharing platform in real time within 24 hours, this platform provides immediate, rapid and integrated reports and images of patients in different medical institutions.

Purpose/Methods

Medical system construction inspection (check) project medical order repeated opening prompt system, the use of health care medical information cloud query system to query the public for 6 months to carry out a specific test (check) records and tips to remind doctors to avoid repeated examination (check) items, and the Health Care Department regularly feedback medical imaging to the number of pieces (cross-hospital).

Results

Statistics 108 year using the "health care medical information cloud query system" medical imaging to the number of pieces (cross-hospital) for 275 ,in 109 year medical imaging to the number of pieces (cross-hospital) for 675; in 109, medical imaging to increase the number of pieces by 400, or 59.26%, over 108 years, and saved about 1,368,000 yuan in health care resources.

Conclusions

Medical staff can understand the results of examinations (checks) and medical images opened by patients in other hospitals through the Health Care Information Cloud Enquiry System, which can save people time and money to wait for hospital access to information, and also reduce the potential health risks of repeated examinations and avoid waste of medical resources.

Contact: LIN Ching-feng

Keelung Hospital Ministry of Health and Welfare
201 Keelung, chingfeng01@gmail.com

Enhance Public Awareness of Air Pollution Risk Through Air Pollution and Tobacco Education

LIN Chih-Yi, TSAI Chun-Chi, CHEN Kuei-Hua, TSAI Wei-Chi

Introduction

Taiwan is located at the downwind of the East Asian monsoon circulation. The impact of pollution such as dust and haze on air

quality is more significant in the autumn and winter seasons. In recent years, air pollution has become the most important environmental issue for people in this country, and it has also become a hidden issue in people's lives. The purpose of this study is to improve the public's awareness of air pollution and self-protection measures through air pollution and tobacco health education courses.

Purpose/Methods

The research object is people who participating in the air pollution and tobacco education courses organized by the family medicine department and filled out air pollution awareness questionnaires before and after the courses. This study distributed a total of 157 questionnaires and collected 152 effective questionnaires. The effective recovery ratio of questionnaire was 96.81%. Data were collected between June and August 2020.

Results

After the health education course, 11.18% of the people's willingness to quit smoking increased by 3.28% compared to the pre-health education (7.90%); 52.63% of the people knew that the windows should be closed when the air pollution warning was issued, compared with the pre-health education (15.79%) increased by 36.84%; when faced with air pollution, 87.50% of the people would choose to wear masks to reduce air pollution exposure when going out, which was 5.92% higher than that before health education (81.58%).

Conclusions

When faced with the threat of air pollution, in addition to the efforts of government and business groups to prevent air pollution, through air pollution and tobacco related health education courses, let the public understands the air quality of the living environment and knowledge about air pollution, and adopts appropriate self-protection measures to reduce exposure to air pollution.

Contact: LIN Chih-Yi

joannalin0824@gmail.com

Establishment of Digitalized Personalized Nutrition Education Video Portfolio in Hospital Patient Information System

CHEN Hui-Chuen, LIN Jing-Meei, CHEN Pey-Rong

Introduction

Nutrition is vital for recovery during hospitalization, but most patients receive nutrition education from dietitians via physician's referrals, not promptly. Meanwhile, nutrition education video-portfolio was not built in hospital patient information system. So, education video-QR-code-posters were made and pasted on ward-stations. Patient could scan QR-code and picked videos to read. This disseminating route was lack of personalization and couldn't be replayed. Therefore, incorporating video portfolio into hospital system to let nurses choose suitable videos by patient's diseases specificity was urgent.

Purpose/Methods

Diet therapy Videos are filmed by dietitian. With cooperation of dietitians, computer technicians and ward nurse heads, "on-demand nutrition education system" built in hospital nursing information system was established in August 2020. Nurses could select videos by patient's disease and medical treatments. As receiving QR-code, patients could read videos at any time in any place by their cell phone/other device. Reading period is from hospitalization to 2 weeks after discharge. Patient can immediately answer video satisfaction survey after viewing.

Results

There were 28 videos in the portfolio up to March 2021, which covering topics such as Diabetes, heart failure, hypertension, chemotherapy, kidney diseases, intestinal disease, hyperlipidemia, gastrectomy, dysphagia, etc. The top 5 popular videos were "high protein-high energy diet", "low microbial diet", "food exchange for protein-rich foods", "Diabetes diet", "low residual diet". Total click count were 653 from August 2020 to March 2021. The average satisfaction score for video were 4.5 (Total score=5).

Conclusions

Through this system, patients could promptly gain nutrition information related to their diseases or medical treatment without limit of time or space. Patients were also satisfied with videos by the internet. Therefore, video-nutrition education is a feasible and efficient way to improve hospitalized patient's disease and nutrition-related knowledge.

Contact: CHEN Hui-Chuen

National Taiwan University Hospital
10002 Taipei City, chchen1502@ntuh.gov.tw

The Impact of Hospital Footprint Systems on Community Health Care and Health Promotion

LAI Chia-Wen, LI Yu-Ching

Introduction

Digital footprints can bring many conveniences in the internet. The digital footprints are widely and generally used for business purposes. The use of digital footprints in hospitals can expand more community bases for medical care and health promotion. It makes community people to obtain more health assets and enhance the digital added value of the medical industry.

Purpose/Methods

The hospital professionals used the footprint system to check in at community service locations. The check-in projects included health promotion, health care and service locations. The footprint system could help to analyse community service areas of the hospitals, expand more community health service bases and improve the health promotion and health care content for the community people.

Results

The results showed that there were 1,265 check-in times using the footprint system in 2019. There was a significant difference between the use of the footprint system in 2019 and not use in 2018. The area of community health care and health promotion

services rose from 95 villages in 2018 to 119 villages in 2019, an increase of 25%. The service times rose from 34,189 to 38,985, an increase of 14%. Discovering the community people who needed medical care and assisting them in referrals rose from 1,198 to 2,550, an increase of 112%.

Conclusions

The digital footprint system can effectively analyze the villages in need of health care and promotion, and provide hospitals with an understanding of the current state of community health care and promotion as a basis for improvement.

Comments

Hospitals in Taiwan rarely use the footprint system. It is recommended that the system should be promoted and used in various hospitals to improve the health care and health promotion of the people in Taiwan.

Contact: CHIA WEN Lai

Show Chwan Memorial Hospital
CHANGHUA, chd7203270@hotmail.com

Effectiveness analysis of community medication education management using multimedia application interactive software

PENG Hsiao-Yun, CHANG Hsing-Yi, LI I-Hsun

Introduction

Pharmacists play an important role in community medicine education. However, a community health education often requires a lot of tools (such as health education leaflets, questionnaires), and statistics are needed after medicine education. A novel App on smart devices have been established to solve these inconveniences. The App contained information of glaucoma medicine, the treatment course and proper medication. Pharmacists could easily develop community drug safety and pharmacy activities with a convenient App on smart device.

Purpose/Methods

Pharmacists used the App to educate correct medication knowledge for the public. This study was a cross-sectional observation design from January 2019 to June 2019. Pharmacists performed 5 sessions of community education with the topic "Glaucoma medication knowledge and health literacy". The App contained pre-test and test questionnaires, multimedia materials and statistic. Participants needed to fill in a same questionnaire, which contained 10 questions, before and after the pharmacist's intervention. The results were analyzed using t test.

Results

Total 30 participants who received glaucoma drug education were included. The outcome of pre- and post-intervention analysis significantly improved the knowledge of glaucoma related medications. The overall average score correct rate improved from 40.3% to 90.6%, $p < 0.001$. It is known that the correct rate of the course of drug treatment has improved from

36.8% to 90.1%, $p < 0.001$; the correct rate of medication knowledge has improved from 59.8% to 90.7%, $p < 0.001$.

Conclusions

Pharmacists carry a convenient smart device by participating community activities to enhance health literacy of public. App interactive software in community medication education and management, the pharmacists can quickly collect statistical data in addition to clinical work, teaching, and administrative services within a limited time. Keep pace with technology to serve community services will greatly enhance the value and professional image of pharmacists.

Contact: PENG Hsiao-Yun

Tri-Service General Hospital

11490 Taipei, yunwwt@gmail.com

Enhancement of patient safety and quality efficiency via construction of a patient identification system with personal profile

CHANG Hui-Ju, CHIANG Tzu-Hsuan, KUO Chin-Ming, TSENG Hui-Ling, YANG Yuh-Ying

Introduction

To strengthen patient identification in hospitals, Taiwan's Department of Health has made improving the accuracy of patient identification an important goal to achieve patient safety. Therefore, in order to improve the accuracy of patient identification when performing blood drawing and electrocardiogram in inpatients, we develop information systems to reduce patient identification errors.

Purpose/Methods

The components of patient identification system include: a patient identification APP, a QR code scanner and a tablet computer. The patient identification APP contains all the information of the patient. When unmatched QR code is scanned, errors are presented to the technician immediately and the further procedure will be ceased. This system can also conduct statistical analysis of working efficiency, correct acquisition and operation point-in-time data.

Results

The patient identification system was used from June 2017 to June 2020 to inpatients with blood drawing and electrocardiogram. The records from daytime wards during these two years show 0% of error of patient identification.

Conclusions

Before the patient identification system was applied, lab technicians collected blood samples after matching the information on lab application sheet with that on the wristbands worn on patients. However, unintended or unexpected mistakes may arise due to incorrect patient identification. This resulted in blood collection of wrong patients and poor records of the exact blood-drawing time. On the other hand, the duration of blood collection and EKG operated by medical technicians cannot be monitored. After the establishment of the patient identification

system, the system based on information program with the combination of the tablet and QR code scanner dramatically improves the accuracy of patient identification. This patient identification system was also introduced to the systems of pharmacy department, radiology department as well as nursing department to improve patient identification to achieve patient safety and risk reduction.

Comments

This patient identification system was also introduced to the systems of pharmacy department, radiology department as well as nursing department to improve patient identification to achieve patient safety and risk reduction.

Contact: CHIA WEN Lai

Show Chwan Memorial Hospital

CHANGHUA, chd7203270@hotmail.com

Thermal Effect of Hot Air Blower during General Anesthesia Abdominal Operation

CHEN Mei Ju

Introduction

In middle phase of operation, the effect of drug after general anesthesia and the low temperature in operation room are easy to cause the decline of core body temperature, so as to affect body temperature regulating center. Low body temperature may induce many adverse operation results, such as disorder of blood coagulation, heart problem and metabolic problem. The purpose of this research is to compare the influences of using hot air blower in middle phase of operation on patients of abdominal operation.

Purpose/Methods

The design of this research is a quasi-experiment research with 20 patients of abdominal operation. The control group used green sheet which were heated to 50 degrees by drying oven for heat preservation while the experimental group used air blower heating blanket for heat preservation, so as to compare the effect of improving low body temperature during operation.

Results

The research results of two groups show that the experimental group which used hot air blower during operation can effectively maintain body temperature during operation, and avoid rapid decline of core body temperature to cause low body temperature.

Conclusions

Conclusion: The study found that the use of a blower-type warmer (temperature setting 38-43°C) during the operation can help improve the hypothermia during the operation. The report hopes to provide nursing staff with differences in patient temperature during surgery and provide patients with warmth to reduce the risk of patients' body temperature falling. During the admission process, there were 25 cases, 2 cases took less than 60 minutes, 1 case was younger than 18 years old, 2 cases had fever (body temperature > 38°C), 20 cases were admitted after the conditions were excluded. It is recommended to expand the sample size Collect the surgical locations with other departments

(thoracic surgery, orthopedics) and compare their differences to understand the effectiveness of interventional measures.

Contact: CHEN MEIJU

Hsinchu Mackay Memorial Hospital Taiwan
Thermal Ef Hsinchu City, smile80050@gmail.com

A study on the use of telemedicine to reduce the number of visits to hospitals by residents of long-term care institutions

LO Li-Ly, RENN Jenn-Huei, PAN Li-Fei, WU Chieh-Shan, TSAI Yu-Hsuan, CHEN Hsiu-Hua

Introduction

Residential Long-Term Care Facilities (RLTCF) have a high proportion of elderly residents with chronic illnesses, dementia, and illness-related disabilities and impairments. Despite the availability of institutional health care team physicians, there is still a need for other medical specialties. WE hope to use the Hospitals Vertical Integration (HVI) model, in which physicians within the system provide telemedicine consultation, to barriers specialty care ubiquitously and reduce the number of outbound visits, thereby reducing the risk of infection among residents and accompanying health care.

Purpose/Methods

Case study research approach was adopted in this study and the subjects included a tertiary medical center dermatology department and a residential-type long term care facility. The dermatologists at the medical center examined the patient's lesions or reviewed the images through video communication and provided the physicians of the long-term care facility with medication recommendations, referral recommendations, as well as health education consultation if necessary. The data were collected and the feasibility of reducing the number of visits by residents to the hospital was well explored.

Results

From October 2020 to March 2021, a total of 9 dermatology video consultation sessions were conducted and 26 consultations were completed, including 20 medication consultations, 6 referrals, and 20 skin health education sessions, reducing the rate of outpatient visits by 4.5% for residents, reducing the number of staff accompanying patients to medical appointments by 26-33, reducing the cost of attendance expenses, and increasing the number of agency-affiliated clinics by NT\$ 10, 934 in revenue.

Conclusions

The remote video consultation method has increased the accessibility of medical treatment for the RLTCF residents and has indeed reduced the number of visits to the hospital and improved the health management of the residents and the capacity of the organization.

Contact: LO Lily

Kaohsiung Veterans General Hospital
llo@vghks.gov.tw

Poster Session 8: Patient and provider communication and patient empowerment

Postoperative Outcomes of Patients Undergoing Laparoscopic Sleeve Gastrectomy

HUANG Mei-Fen, WU Shu-Hui, YEN Chia-Chi

Introduction

The patient was fond of sweets and suffered from high blood pressure, lipid abnormalities, and hyperuricemia. Troubled by obesity, the patient tried a variety of ways to lose weight but eventually failed and was therefore hospitalized for bariatric surgery. The study explored the care and possible complications of laparoscopic sleeve gastrectomy and supported behavioral change. The patient finally succeeded in losing weight and improving the quality of life. Purpose: The study explored the postoperative outcomes of a 30-year-old male patient undergoing laparoscopic sleeve gastrectomy due to morbid obesity (BMI: 48.44 kg/m²), including creating a healthy lifestyle.

Purpose/Methods

From April 10 to April 23, 2017, the author explained to the patient pros and cons of various bariatric surgery and possible complications. After effective communication and a holistic assessment, appropriate surgery was selected, combined with a healthy lifestyle plan covering nutrition training, a diet plan, and regular exercise.

Results

After laparoscopic sleeve gastrectomy and a progressive diet plan, the patient lost 13 kg in two weeks, and his BMI was reduced from 48.44 kg/m² to 44.8 kg/m².

Conclusions

Easier and safer than other bariatric surgery, laparoscopic sleeve gastrectomy can reduce the occurrence of intra-abdominal hernias and the loss of protein and minerals. By reducing the secretion of hunger hormones, it can successfully reduce the desire to eat and reduce excessive hunger, furthering weight loss by 60% within two years. With small wounds, less blood loss, and faster recovery, it allows patients to be discharged from hospital early and get back to work soon. Clinical practice is recommended accordingly.

Contact:

mei650817@yahoo.com.tw

Use cross-team cooperation to improve the effectiveness of patients with terminal illness receiving peaceful and palliative care

HUANG Chiung Hua, CHEN Hui Mei, WU Meng Syun

Introduction

The Taiwan legislators enacted the "Hospice-Palliative Care Act" in June 2000. The symptoms in terminally-ill patients affects their Quality-of-Life. Hospice-Palliative Care aim to give respect their wishes and protect their rights; the right to decide on medical treatment at end-of-life, to promote symptom relief, meeting spiritual balance, ensuring a dignified peaceful death. (Chen et al., 2016). Our survey in our hospital (January to December 2018) showed 45.4% Hospice-Palliative Care coverage, this serve as a motivation for our team.

Purpose/Methods

To promote the use of Hospice-Palliative Care and increase its coverage rate in hospitalized terminally-ill patients, through multidisciplinary team work.

Results

This project was implemented from February to September 2019 at the medical ward of a regional teaching hospital in Hsinchu. Our group consist of six membered nurse practitioner who were assigned to investigate for reasons of low coverage rate; other team members who took part include: physicians, other nurse practitioners and registered nurses; including Information Technology computer programmer who took part in improving the computer consultation system; and recruiting of patients into the study; increasing the awareness of Hospice-Palliative Care.

Conclusions

The Hospice-Palliative Care coverage rate in hospitalized terminally ill patients through February 2019 to September 2019 had increased from 45.4% to 60.6%.

Contact: HUANG chiung hua

Hsinchu MacKay Memorial Hospital
Hsinchu, chiung0915a@gmail.com

Training the facilitators of the Being Happiness Catchers -5L for suicide prevention among metropolitan cities and non-metropolitan counties in Taiwan

FANG Chun-Kai, HSIAO Hsueh-Wen

Introduction

The BHC-5L (being happiness catchers- looking, listening, learning, loving, and living) has been developed in New Taipei City since 2010 not only for suicide prevention but also for mental health promotion. The Ministry of Health and Welfare

decided to promote the BHC-5L for suicide prevention in the other areas since 2017. Before 2018, there were 300 trained facilitators in 10 administrations. The report presents the training programs of the BHC-5L in the other 4 non-metropolitan counties and 2 metropolitan cities in 2019.

Purpose/Methods

MacKay Suicide Prevention Center were authorized by the Ministry of Health and Welfare to organize and practice the training programs. There were 4 counties and 2 cities, including Miaoli county, Taitung county, Changhua county, Yunlin county, Taipei city, and Tainan city. The programs included 2-day basic lectures and 2-day workshops. After the basic lectures, trainee had to attend the written examination. Only who passed the examination could attend the following 2-day workshops as the candidates. After the workshops, candidates had to attend the oral examination. Passing the final oral examination, they would be the facilitators.

Results

From May to December 2019, there were 183 trainees attending the 2-day basic lectures, and 172 (94.0%) passed the written examination becoming the candidates. There were 163 candidates attending the 2-day workshops, and 121 (74.2%) passed the final oral examination becoming the facilitators. The final pass rates were 50% in Miaoli county, 69.8% in Taitung county, 50% in Changhua county, 55.3% in Yunlin county, 88.9% in Taipei city, and 79.2% in Tainan city. The pass rates in metropolitan cities (80.6%) were much higher than non-metropolitan counties (58.7%).

Conclusions

The facilitators played important roles to facilitate the health promotion and suicide prevention. From 2017 to 2019, all administrations in Taiwan had trained facilitators. However, we found the low pass rates among non-metropolitan counties. The next strategy for suicide prevention should be how to enhance the awareness of suicide prevention among non-metropolitan counties.

Contact: FANG Chun-Kai

MacKay Memorial Hospital
Taipei, chunkai.fang0415@gmail.com

Stress reduction group program in surgical wards

YANG Li-Min, TSENG Chih-Ting, YAO Pei-Hua, TSAI Li-Li

Introduction

When staying under a surrounding full of high pressure like in hospitals, patients and the relatives have to face the many complicated medical treatments and medical checks, and that may trigger the senses of helplessness and insecurity in the patients and the families. In addition, with the factors such as the changing condition of the illness, long hospitalization as well as the conversion of the character and the function with inpatients and the families, usually cause more emotional stress.

Purpose/Methods

The program is objected to create a space and some time to attenuate the stress that patients and the relatives suffered

during the hospitalization, and to aid distracting attentions on the pain from the illness and the treatments. The program is targeted to service the patient and the relatives in surgical wards. The stress reduction group hold 7 times. The program with a mode of group social work binding with the art of company, and using the test of emotion assessment.

Results

The results indicates that: (1) the number of participants experienced the emotional condition changed from low to high is 22 persons (68.75%), and the number of participants experienced smooth emotional condition is 10 persons. (2) patients and the relatives were able to have a space to relieve and take a break through joining in activities of creating artworks. (3) the patients and the families had more opportunities to share feelings with each other by joining in the activities.

Conclusions

The stress reduction group program does really provide a space for patients and the relatives to relax, reduce stress, that makes the patients and the families who stay under a high pressure surrounding for the treatments of illness may transform the bad moods and also access emotional supports interacting with other patients and the relatives.

Contact: LI-MIN Yang

Mackay Memorial Hospital

New Taipei City, limin.a065@mmh.org.tw

Improving inpatient satisfaction towards the information of medication safety

DU Yi-Ju, HSIEH Chia-Ling, HUANG Mei-Ling

Introduction

Previous survey revealed that inpatient satisfaction towards the information of medication safety only reached 88%, lower than the last time.

Purpose/Methods

From January 23rd to January 30th, 2021, twenty patients and their families filled out the survey containing open-ended questions. 40% of the subjects mentioned that the chemotherapy was administered close to noon, which was very late. 10% of the subjects noted that the nurses did not inform the chemotherapy schedule; lack of post-chemotherapy medical information also accounted for 20% of complaints. Measures implemented: (1) Reminder cards were made. When nurses receive calls to fetch chemotherapy medications, they should inform the primary nurse, and place a reminder card on his/her working station. (2) The time when chemotherapy medication was prepared should be recorded on personal sheets, to ensure timely delivery of medications to the ward unit. (3) Ask the nurses to provide medication information about post-chemotherapy safety immediately after the medication was given, and to document in the "records of treatment information provided to the patient/family" under the "information/content" section. Nurses who work in the next shift will ensure the patient and the families have understood.

Results

The reminder cards were used 71.4% of the time. The completion rate of providing medication information was 100%. The satisfaction about medication safety provided by nurses went up to 92%.

Conclusions

The patient satisfaction survey found that patients were concerned about drug safety. and the medical team will be checked at the same time. The medication guidance provided by the nurses and the medication safety provided by the nurses can improve hospitalization satisfaction.

Contact: DU yi-ju

National Taiwan University Hospital Yunlin Branch

Yunlin, ery03511@gmail.com

Preliminary study on the effectiveness of using Shared Decision Making model for patients with acute coronary syndrome

YANG Shu-Han, SYU Wan-Yu, LI Jhih-Ning, LIN Mei-Ling, CHEN Shu-Nuen, TSAI Yi-Fan

Introduction

Our unit is an intensive care unit (ICU) of a regional hospital in Taipei, Taiwan. From January to June 2019, 15% of the patients were admitted to ICU due to acute coronary syndrome (ACS). There are many ways of treatment for ASD, which will make caregivers difficult to make decisions and cause anxiety. The purpose of this study was through the shared decision making (SDM) could improve the caregivers' choice ability, increase the satisfaction of decision-making and reduce anxiety.

Purpose/Methods

The study period is from October 2019 to December 2020. Our strategies are described below. (1) Provide a graphic explanation manual and multimedia video introduction for the treatment of ACS. (2) Using SDM to explain treatment options by interactive evaluation form. (3) Using QR Code link to the website to get relevant information. (4) Evaluated the satisfaction of decision-making and anxiety by the questionnaire.

Results

A total of 70 patients and caregivers who received SDM decision instructions and assistive tools found that the average satisfaction was 92%. After Implementation of SDM, we used the Baker Anxiety Scale to average 14.2 points down to an average of 3.7 points. Significantly reduced anxiety score.

Conclusions

Through SDM model, patients and caregivers are informed about the most suitable treatment plan for ASM and the follow-up care process to achieve the maximum effectiveness of medical communication and improve the satisfaction of decision making.

Contact: TSAI YI-FAN

Taipei City Hospital, Young Ming Branch

10453 Taipei, b1717@tpech.gov.tw

Applying the picture exchange communication system cards to improve the communication of dental home visit

YANG Shu-Chi, HSU Chia-Chien, HOU Chun-Mei, CHEN Shu-Nuen, TSAI Yi-Fan

Introduction

This unit is a home care center of a regional hospital in Taipei, Taiwan. In 2018, a total of 139 nasogastric tubes were placed and 10 patients whom were required to refer the dentists at home (7.2%). After treatment, 6 patients (60%) were found to have increased sputum and increased caregiver care loading. Our purpose of this study is to improve the main caregiver need to "do something before and after the dental home visit" to improve patient safety.

Purpose/Methods

The study period is from January 2019 to December 2020. The nurse needs to communicate and teach the caregivers before dental home visit. We use colorful and visual stimulation to distinguish what should be done. The picture exchange communication system (PECS) cards are made of paper in black, yellow and white colors. The black card is before the visit, the yellow card is during the visit, and the white card is the caregiver needs to do after the visit.

Results

A total of 24 patients were received. The home nurses used the "PECS communication card in black, yellow and white colors" to teach the caregivers before the dental home visit. After the dental home visit, we found there was only one patient increase in sputum. The reason why is due to changed of foreign nurse aide whom unfamiliarity with oral healthcare skills. We also found that after implementation the satisfaction rate is over 95%.

Conclusions

Through the "PECS Communication Card", it can correctly remind caregivers of everything that needs to be done before and after the dental home visit, then achieve the maximum effectiveness of nurse-patient communication and increase patient safety. It is worth to use the card of home care in whole community.

Contact: TSAI YI-FAN

Taipei City Hospital, Young Ming Branch
10453 Taipei, bs17@tpech.gov.tw

Innovative health education-mobile inspection consulting

TSENG Hui-Ling, TSAI Hsin-Yu, CHANG Hui-Ju, KUO Chin-Ming, YANG Yuh-Ying

Introduction

Nowadays, Adhering to breaking the framework and taking the initiative to move services out of the laboratory, we set up a "clinical medical examiner" team to provide professional,

accurate, fast and planned Mobile inspection consulting services to improve medical quality.

Purpose/Methods

1. Provide medical inspection and health education services to outpatients: Regularly organize outpatient blood extraction area and provide health education in a lively and interactive way, so that patients and their families can obtain more relevant knowledge about lab testing, and have a higher sensitivity to the occurrence of diseases. 2. Initiate the promotion of medical examination through broadcasting: in cooperation with radio stations, to transmit inspection and health education information to the ears of each listener, helping the public to recognize the importance of health and carry out preventive medicine. 3. Strengthen the promotion of community medical inspection and education: In order to make the consulting services for lab testing no longer confined to the hospital, with the characteristics of the mobile testing consulting services, the correct testing concept will be implicitly embedded in the mind of the people

Results

For promotion of medical inspection and health education services, the target was set in 2020 was ≥ 36 times of courses held, and 40 times of courses have been completed so far. The pre-test average is 67%, the post-test average is 96%, and the post-education satisfaction was 95.9% to the activities.

Conclusions

The public can learn about physical health by participating in inspection and health education activities, and understand different types of specimens can be used to screen for different diseases. In addition, people can correct misconceptions about inspections and enhance their awareness of diseases. Let the public know that professional issues need to consult professional staff in order to get the most effective professional help.

Comments

The public can learn about physical health by participating in inspection and health education activities, and understand different types of specimens can be used to screen for different diseases. In addition, people can correct misconceptions about inspections and enhance their awareness of diseases.

Contact: CHIA WEN Lai

Show Chwan Memorial Hospital
CHANGHUA, chd7203270@hotmail.com

A Pilot Study into the Application of the "Speedy Mailbox"—Reducing the Complaint Cases in a Psychiatric Rehabilitation Ward

LI Pei-Shan, LU Huei-Lan, WU Wen-Cheng

Introduction

The employment of the "Speedy Mailbox" in a psychiatric ward can cut down on the patients' complaint cases and their needs are promptly met. As a result, the inpatient satisfaction is improved and nursing quality is enhanced.

Purpose/Methods

After the "Speedy Mailbox" was set up in a psychiatric ward, its function was explained and advertised in the ward meeting. In the process of demonstrating how to use the "Speedy Mailbox", its purpose, benefits, and convenience were emphasized. Doctors, nurses, occupational therapists, psychologists, and social workers formed an executive group, which was responsible for the triage and management of the inpatients' complaints. Related personnel discussed first, tracked the execution progress next, and the records were made in the report at last. After an analysis of the reports, the defects were remedied to be responsive to the patients' complaints, so that both inpatient satisfaction and nursing quality could be enhanced.

Results

After the employment of the "Speedy Mailbox" for a year, the findings are as follows. First, the number of the complaint cases reduced from 32 to 6. Second, the processing time of the complaint cases was shortened from one week to three days. Third, 93% of the inpatients were satisfied with the "Speedy Mailbox" while 82% of them were content with the original director-general mailbox. The inpatients also mentioned in the qualitative questionnaire that their needs were respected and fulfilled. Moreover, they stated in the questionnaire that the medical team cared more about them and their problems were solved by different experts. Through communication and discussion, not only were the inpatients' problems fixed but the nursing quality was also enhanced. It is true that the "Speedy Mailbox" has a positive effect on nursing services.

Conclusions

The application of the "Speedy Mailbox" prompts the medical team to cooperate and to reevaluate the inpatients' suggestions. In this way, their problems are properly addressed and the nursing deficiencies are remedied. With the participation of experts from different backgrounds, the nursing quality and the inpatients' satisfaction are sure to improve.

Contact: LU Huei-Lan

Jiannan Psychiatric Center, MOHW
71742 Tainan, 14404@mail.cnpcc.gov.tw

The Counseling for Advance Care Planning: the experience of three-talk model for shared decision making

CHEN Ru-Yih, HSUEH Kuang-Chieh, HUANG Tzu-Ya, CHANG Hui-Ying, YANG Hao-Yu, SHEN Yun-Ju, CHEN Jin-Shuen

Introduction

Patient Right to Autonomy Act (PRAA) allows that persons with full disposing capacity may make advance decisions (AD) to accept or refuse, in full or in part, life-sustaining treatments (LST) and/or artificial nutrition and hydration (ANH) under 5 specific clinical conditions in Taiwan. The declarant must go through counseling on advance care planning (ACP) in a medical institution to establish an AD. The consultation team should

include one physician, one nurse, and one social worker or psychologist.

Purpose/Methods

We regard the ACP as a shared decision-making process. We use three talk-model, including "team talk," "option talk," and "decision talk," for the process. The physician is responsible for explaining 5 specific clinical conditions and the options of LST and ANH, the nurse for the care and burden of LST and ANH, and what hospice palliative care can help after implementing AD, the social worker or psychologist for giving reassurance and emotional support.

Results

We provided counseling on advance care planning for a total of 548 declarants (mean age 58.54 ± 16.90 years) between April 1, 2019, and March 31, 2021. Most declarants were female (64.05%). There are 136 free-of-charge declarants, including hospital employees, veterans, low- and middle-income households, and patients with rare diseases. The other declarants need to pay about 90 EUR for each counseling session. Most ACP counseling sessions took about 1 hour by the three talk-model.

Conclusions

PRAA is stipulated to respect patient autonomy in healthcare, safeguard their rights to a good death, and promote a harmonious physician-patient relationship. The ACP counseling team needs to discuss the pros, cons, and feasibility of multiple options with declarants, use appropriate communication skills to eliminate anxiety or conflict between declarants and their families, and respect the declarants' choices. The counseling team can assist the declarants in establishing their AD by the three-talk model smoothly.

Contact: CHEN Ru-Yih

Kaohsiung veterans general hospital
81362 Kaohsiung City, rychen@vghks.gov.tw

Application of Question Prompt List(QPL) for Chronic kidney disease Patient with treatment decision

CHEN Yi Ching, CHEN Jean-Shi

Introduction

Chronic kidney disease affects the burden of health and medical costs of people. Once the treatment phase begins, how to let patients and their families decide for themselves the dialysis method is the key to continuous treatment. Through a structured question list, focusing on the problems of patients and their families can help improve patient self-awareness, resolve concerns, and strengthen Physician-patient communication

Purpose/Methods

The action plan includes: (1) Use the seminar to invite nephrologists and nurse practitioner to set up a questionnaire and decide 6 questions;(2) patient test Question Prompt List to ensure complete content;(3) Establish a Question Prompt List execution process;(4) Design Google forms to upload questions to the cloud directly by patients and their families;(5) Set up a doctor's real-time Query system;(6) Review and statistics of regular kidney meetings.

Results

Analysis of thirty patients with chronic kidney disease from July to November 2019, 70% of patients asked questions used Question Prompt List(QPL) from Google Forms or on-site, 62% of patients ask 1 to 2 questions on average ; And after using the Question Prompt List(QPL), the anxiety of the subjects significantly decreased (3.8 ± 1.2 vs. 2.9 ± 0.7 , $p = < 0.001$ by paired test), Greater certainty of treatment options (unclear options reduced from 70% to 7%)

Conclusions

We also used of Question Prompt List(QPL) can help patients with chronic kidney disease to ask questions proactively, take treatment decisions early, reduce anxiety reactions to medical problems, and improve the relationship between doctors and patients.

Contact: CHEN Yi-Ching

Tainan Municipal Hospital

70173 Tainan, yiching@mail.tmh.org.tw

Improve Satisfaction of Dialysis Model Selection in Patients with the End-Stage Renal Disease with Shared Decision Making Aids

CHENG Tsai-Yun

Introduction

Shared decision making (SDM) is a patient-centered clinical medical implementation process that combines knowledge, communication, and respect for these elements. Improve the overall satisfaction of dialysis mode health education, add health education manuals and develop patient decision aids (PDAs) of dialysis mode, unify the method of health education explanation, reduce medical disputes, and then improve the quality of care. A good kidney care team can indeed help patients maintain renal function and delay the time to progression to dialysis.

Purpose/Methods

The chronic kidney disease (CKD) health education team (CKD educator, nurse of hemodialysis center, hospice shared care nurses, nutritionists, and pharmacists) conduct health education. Through the evaluation and explanation patients can fully understand the various kidney replacement therapies, but also have some impact on patient's lives. Promote SDM and PDAs help patients and their families understand what medical options are available, as well as advantages and disadvantages, and use them to make medical decisions that are appropriate for patients.

Results

The number of patients with SDM from Pre-ESRD stage-5 CKD from January to December 2019 in the Statistical Institute was 26, with an average of 2.2% per month. The number of patients from January to December 2020 was 32, with an average of 2.7% per month. Patient's cognition of dialysis mode selection, the average score before improvement was 43.1 and it rose to 83.1 after improvement. The goal achievement rate: 103.0% and progress rate: 61.5%, reaching statistically significant differences.

Conclusions

The results of the study show that patients are very satisfied with "1. Patient decision aids (PADs) help understand what matters most when facing a variety of medical options. "and "2. PADs to help make the most appropriate medical choice ". The anxiety level is significantly reduced after the use of PADs. After using PADs, the experience and opinions of medical decision-making agreement to achieve effective help. SDM can help reduce patient anxiety.

Contact: CHENG Tsai Yun

CHENG CHING HOSPITAL

400 Taichung City, chenamy00805@gmail.com

Preliminary Study of Construct a Swallowing Training Schedule to Improve Communication Effectiveness of Transdisciplinary Team, Patients and main Caregivers

SYU Yi-Jhen, CHEN Xsiao-Ting, YANG Ya-Chi, WEI Hsiao-Hen, HUANG Shu-Ping, HUANG Li-Ching, TSAI Yi-Fan

Introduction

Our unit is a rehabilitation department ward of a regional hospital in Taipei, Taiwan. According to patient disease classification of cerebrovascular disease (CVD) accounts for 55% and CVD patients with dysphagia account for 83%. We found that family members feed food via oral that patients still have a nasogastric tube which it causes 63.2% incidence of aspiration pneumonia. We hope through our training will reduce aspiration pneumonia.

Purpose/Methods

The study period is from July 2019 to December 2020. The rehabilitation team will design a swallowing training schedule to be filled in by speech therapist, teach the main caregivers to practice the items, and give feedback by nurse. The team members also write observed patient situation and give suggestions in the form; the family members watch the form to understand progress of patient's swallowing training during visit. When patients are discharged, the family members fill out the satisfaction questionnaire.

Results

A total of 165 patients were received, and 165 copies of the satisfaction questionnaire were collected. Patients and their families could understand the swallowing training method and progress through the "swallowing training schedule" reached to 95.3%; patients and their families' satisfaction with training courses reached to 93.6%. Nursing staff and team members could more clearly understand training methods and known patient's progress up to 96.7%. The incidence of aspiration pneumonia decreased from 63.2% to 25%.

Conclusions

The "swallowing training schedule" could accurately and quickly control the progress of swallowing training for patients, and make communicate effectively with patients and main

caregivers. In addition to understanding the progress of swallowing training for patients, it is also possible to gradually adjust the type of diet without cough during the process, increasing the chance of the patients remove nasogastric tubes, and reducing the incidence of aspiration pneumonia.

Contact: TSAI YI-FAN

Taipei City Hospital, Young Ming Branch
10453 Taipei, b1717@tpech.gov.tw

Establish a medical sharing decision-making start-up process to assist patients who are resuscitated after cardiac arrest in deciding follow-up care plan

CHU Yu-Jen, LEE Wan-Ling, YANG Bey-Jing

Introduction

The prognosis for cardiac arrest patients after resuscitation is multifactorial and difficult to predict. It is hard for their families to make life-and-death decisions under such emotional stress. Shared decision-making (SDM) is a process through discussions with patients/their families and health care providers to reach medical decisions. The medical teams can understand families' preferences for treatments through SDM process. The aim of our study is to assess whether implementing SDM in patients after resuscitation could improve the decision process

Purpose/Methods

This project is primarily through the establishment of a medical sharing decision-making process, the establishment of good partnerships with family members, to enhance the family's trust in the medical team, and to make appropriate medical decisions in due course. Between June 2019 and June 2020, for patients who are resuscitated after cardiac arrest before arrival, the process is initiated within 7 days of hospitalization, providing options for assisting patients' families with follow-up medical care through a description of the 3 medical options for long-term care, removal of the life support system and organ donation.

Results

During the study period (June 2019 - June 2020), a total of 28 cardiac arrest patients admitted to our ICU. Five patients with complete neurological recovery were excluded. One patient transferred to the hospital and five patients died before completing the SDM process. Total 17 patients were invited into the SDM process and completed the questionnaire. 58.82% of them (10/17) completed the SDM process within 7 days. The others completed after 7 days of ICU admissions. Compared to previous length of stay over past three years, the mean length of stays in ICU shortened from 10.34 days to 8.84 days.

Conclusions

Constructing a good medical sharing decision-making process can increase the satisfaction of patients and their families, shorten the length of hospital stay, avoid improper medication or disposal, and save medical expenses, and finally make the appropriate treatment and care direction for the patient, which can achieve the goal of a win-win situation for medical treatment.

Contact: YU JEN Chu

National Taiwan University Hospital
100 Taipei City, 020641@ntuh.gov.tw

Increasing Participation in Shared Decision Making through Diversified Promotional Methods: A Case Study of medical center.

LIAO Man-Ling, HUANG Chieh-Ling, JUANG Wang-Chuan, HSU Yu-Ping, YANG Tsung-Lung, CHENG Jin-Shiung, CHEN Jin-Shuen

Introduction

Since 2016, this medical center has been committed to promoting shared decision making (SDM). Presently, 99 PDAs are available for clinical use in the system. To strengthen its capability to implement SDM, this medical center has designed different activities targeted at medical personnel, thus promoting a better understanding among participants of the importance of medical communications.

Purpose/Methods

This medical center optimized the usefulness of PDAs through a series of courses and training in departmental meetings to reaffirm the importance of SDM. Additionally, communications with the public were carried out through various means, such as the display of videos in waiting areas, group health education, promotion of Patient Safety Awareness Week. In addition, this medical center interacted with other hospitals through competitions and themed talks to integrate cross-hospital experiences in SDM implementation and the disciplines of schools.

Results

This medical center held four courses on the optimization of SDM PDAs, attracting 141 attendees and developed 10 SDM PDAs. In addition, 139 attendees—including medical staff, teachers, and students—were invited to sessions to learn about doctor-patient communications. This medical center broadcasted a video in the outpatient waiting area. The hospital coupled with Patient Safety Awareness Week activities, which attracted 4,000 attendees. The hospital hold 10 meetings that 168 attendees offered suggestions, as well as their own experiences.

Conclusions

Implementation of SDM is an important step for ensuring patient safety. Its central idea is to provide medical staff with easy-to-understand health information. The public is expected to assume an role and raise or answer health-related questions when seeking medical treatment. During the development of SDM PDAs, the medical staff should pay more attention to factors such as the timing for introducing an auxiliary tool and the suitability of the overall treatment process and environment for applying PDAs to communications.

Contact: LIAO Man-Ling

Kaohsiung Veterans General Hospital
81362 Kaohsiung Country, mandy350499@gmail.com

Increasing Participation in Shared Decision Making through Diversified Promotional Methods During COVID-19: A Case Study of medical center.

LIAO Man-Ling, HUANG Chieh-Ling, JUANG Wang-Chuan, YANG Tsung-Lung, CHENG Jin-Shiung, CHEN Jin-Shuen

Introduction

The widespread COVID-19 pandemic in 2020 has posed many obstacles to the implementation of shared decision making (SDM) in healthcare by Kaohsiung Veterans General Hospital (KSVGH). In the context of social distancing, how did we manage to proceed with SDM and carry out education and training, promotion, contests, and calls for submissions of related work?

Purpose/Methods

This year, we have placed our focus on using E-learning, meetings for disease-specific care certification, keynote speeches, and symposiums to keep reminding and encouraging our healthcare workers to take advantage of SDM to communicate with patients on treatment.

Results

During our implementation of SDM, the COVID-19 pandemic swept across the world. For the utilization of SDM, we have had a total of 106 PDA as of May 2020. In the SDM system, we issued averaging 148 forms per month. Our analysis showed that as of August 2020, there were a total of 113 PDA being utilized via the system. The average number of PDA forms issued per month was 270. A total of 2,459 people participated in the campaigns.

Conclusions

We took advantage of the Patient Safety Awareness Week and in-hospital health promotion activities to organize over five SDM campaigns. A total of 2,459 people participated in the campaigns and scored over 85 points on average in the tests after the campaigns. We displayed related information on in-hospital TV systems and posters to raise public awareness of patient safety and invited patients to actively engage in medical treatment processes.

Comments

SDM(Shared Decision Making);PDA(Patient Decision Aids)

Contact: LIAO Man-Ling

Kaohsiung Veterans General Hospital
81362 Kaohsiung Country, mandy350499@gmail.com

The Counseling for Advance Care Planning: the experience of three talk model for shared decision making

CHEN Ru-Yih, HUANG Tzu-Ya, CHANG Hui-Ying, HSUEH Kuang-Chieh, YANG Hao-Yu, SHEN Yun-Ju, CHEN Jin-Shuen

Introduction

Patient Right to Autonomy Act (PRAA) allows that persons with full disposing capacity may make advance decisions (AD) to accept or refuse, in full or in part, life-sustaining treatments (LST) and/or artificial nutrition and hydration (ANH) under 5 specific clinical conditions in Taiwan. The declarant must go through counseling on advance care planning (ACP) in a medical institution to establish an AD. The consultation team should include one physician, one nurse, and one social worker or psychologist.

Purpose/Methods

We regard the ACP as a shared decision-making process. We use three talk-model, including "team talk," "option talk," and "decision talk," for the process. The physician is responsible for explaining 5 specific clinical conditions and the options of LST and ANH, the nurse for the care and burden of LST and ANH, and what hospice palliative care can help after implementing AD, the social worker or psychologist for giving reassurance and emotional support.

Conclusions

PRAA is stipulated to respect patient autonomy in healthcare, safeguard their rights to a good death, and promote a harmonious physician-patient relationship. The ACP counseling team needs to discuss the pros, cons, and feasibility of multiple options with patients, use appropriate communication skills to eliminate anxiety or conflict of declarants and their family, and respect patients' choices. The counseling team can assist the declarants in finishing their advance decision through the three-talk model smoothly.

Contact: CHEN Ru-Yih

Kaohsiung veterans general hospital
81362 Kaohsiung City, rychen@vghks.gov.tw

The Five-Year Experience of Communication Training Program for Postgraduate Education in Medical Staff

HUANG Wan-Ju

Introduction

Current post-graduate year training (PGY training) in Taiwan hospitals aims to cultivate the "basic professional knowledge" of new medical staff and establish clinical work attitudes and skills with "patient-centered" and "holistic care" as the core values. The PGY training cultivates the ability of communication,

coordination, and common care for recruits in practice to improve the overall quality of medical care. ISBAR (Introduction, Situation, Background, Assessment, and Recommendation) skills of team resource management (TRM) is helpful to the development of communication skills for new medical staff and provide clear guidelines for inter-disciplinary team communication among new medical personnel.

Purpose/Methods

Teaching the application knowledge of ISBAR to PGY members, then use the actual situation encountered in the clinic as the teaching material. First time demonstration, in the second time the PGY drill, then the supervisor will give it suggest.

Results

From June 2017- June 2021, a total of 9 PGY trainees were enrolled. Nine trainees respectively applied ISBAR skills to quality improvement reports, document writing, weekday handovers, team meeting opinions expression, and customer response event descriptions. Nine of them self-evaluation expression skills have improved, and all of them completed PGY training. Among them, 4 (44%) were voted as excellent employees by the whole hospital, which shows that their inter-disciplinary communication skills are complete.

Conclusions

This research summarizes the 5-year experience of participants in a postgraduate training program. We hope it will be a reference for future planning of communication training programs for medical staff.

Contact: HUANG Wan-Ju

Jianan Psychiatric Center, Ministry of Health and Welfare,
71742 Tainan, naugh.wanju@gmail.com

Case management experience on the use of insulin in patients with type II diabetes mellitus by Shared Decision Making

WU Pei Shan

Introduction

The case in this article is a diabetic patient who has suffered from type 2 diabetes for more than 15 years. Hemoglobin A1C (HbA1C) is more than 9% for more than a year. When the doctor recommends that the patient choose insulin therapy, the patient has negative thoughts of treatment failure and anxiety. The reaction triggers the author's motivation for discussion.

Purpose/Methods

During the nursing period from January 9, 2020 to September 10, 2020, use interviews, observations, medical records and Gordon's eleven health function assessments to collect case health information, and establish that the case's main health problem is anxiety and health promotion Management preparedness, overweight. In the nursing process, listen, accompany, encourage the case to express inner feelings, establish a good relationship of trust, and use the role function of the individual manager and the Shared Decision Making of Case Manager and patients to clarify the case's myth about insulin and reduce the case's anxiety. When the case decides to

use insulin treatment, the case will be taught how to prepare for health management such as insulin injection techniques, blood glucose self-monitoring, and hypoglycemia treatment.

Results

After six months of care, the patient has been able to clearly state the goal of blood sugar control, correctly operate insulin injections and monitor blood sugar, and can follow the diabetic diet to achieve the control target of less than 7% of hemoglobin glycosylated and delay the occurrence of complications.

Conclusions

Based on the results of empirical literature collation, when the doctor recommends switching insulin, it is easy to cause the patient to have negative thoughts of treatment failure and accompanied by anxiety. The use of Shared Decision Making intervention and Patient Decision Aids assistance can help the case to clarify the insulin myth and reduce anxiety. It can guide the case to choose the preferred treatment method, promote joint Shared Decision Making and communication between Case Manager and patients. During the care of the nursing staff is all interlocking, which is the same as the spirit of health care for HPH patient and provider communication and patient empowerment.

Contact: WU PEI SHAN

Dalin Tzu Chi Hospital
622 Chiayi, punctuand202@gmail.com

Using Shared Decision Making to increase success rates of smoking cessation

YU Tzu-Ying, LIN Chang-Sheng, SHIH Ai-Wei, LIN Shu-Ling

Introduction

As the awareness of smoke prevention rises, more and more people choose to go to a smoking cessation clinic. In this study, a shared decision-making (SDM) aids was used to make individual patients choose the smoking cessation method that suits them. And continue to track smoking status to see if it can improve smoking cessation.

Purpose/Methods

From March to June 2019, 30 people who were willing to quit smoking and had a nicotine addiction degree of more than 4 points were enrolled as research objects. We use patient decision aids "I want to quit smoking, what are my choices?" by comparing and deciding to quit smoking. An analysis was also made of 30 non-SDM health education smoking cases matching by age, to compare the decrease in smoke volume in one week.

Results

After SDM aids intervention, none quit smoking by willpower nor counseling; 2 (6.7%) chose medication, 28 (93.3%) chose medication plus counseling. Effectiveness of reducing smoke volume in one week: SDM group -11.4 ± 10.1 , non-SDM group -7.6 ± 10.2 ($t = -1.416$, $p = 0.162$). SDM group was better, but did not reach a significant difference; the number of people reduced smoking in one week: 25 (83.3%) in SDM group were significantly higher than 17 (56.7%) in non-SDM group ($X^2 = 5.079$, $p = 0.024$).

Conclusions

Using the SDM can give individual cases insight into their concerns and help to choose the appropriate smoking cessation method. It also allows clinical health education staff to provide individual health education for patient's specific characteristics. The results showed that the use of SDM to assist health education is effective in reducing the smoke volume in a week.

Comments

In addition to medical treatment, Taiwan also attaches great importance to the health promotion of its citizens in order to improve the health of the people. Our epidemic prevention strategy has clearly become a global model. Hospital is an indispensable part of medical treatment and epidemic prevention, and the relationship between doctors and patients is the key factor. We will continue to promote the overall health of people and strive to become the best health promotion hospital.

Contact: CHIA WEN Lai

Show Chwan Memorial Hospital

CHANGHUA, chd7203270@hotmail.com

Department of Nephrology in a certain district promotes SDM effectiveness ~ Taiwan experience

TSAI Wan Yi

Introduction

In response to the Ministry of Health and Welfare's SDM as "the annual goal of medical quality and patient safety", in order to practice the spirit of SDM, patients can participate in medical decision-making, so the hospital's nephrology department promotes SDM activities to promote medical communication.

Purpose/Methods

1. Form a team and division of labor: Team members have: The nephrologist, the nursing director, and the health teacher are responsible for establishing the process and providing relevant resources by the nursing director. The physician initiates SDM and the health teacher performs SDM. 2. Education and Training: Team members participate in Coaching training workshops and PDA workshops 3. Process introduction and implementation process: weekly team meetings, joint SDM process, the actual implementation of SDM, discussion and correction of process issues, correction, reduction of waiting time, use of computer animation to make older people more aware of SDM content.

Results

1. In the CDK Stage5 case, 37 people were initiated by the physicians and referred to the teachers for interviews. 2. Three SDM advocacy lectures were held for the chronic kidney disease group, and 36 participants were involved in SDM promotion and the use of the participating students. 3. The patient using the paper tool is about 18 people, and the film + paper tool is about 19 people. Participated in the medical strategy meeting SDM practice activities to win the award.

Conclusions

Taiwan is a dialysis kingdom. It should be guided early. Maybe it can be intervened in the third phase. With SDM, patients can choose their own measures to prevent disease progression, so as

to improve the quality of life of patients, prevent diseases and reduce unnecessary medical expenses.

Contact: WAN YI TSAI

Taipei Municipal Gan-Dau Hospital

Taipei City, debra671@yahoo.com.tw

Poster Session 9: Supporting patient behavior change and healthy lifestyles

Nursing experience of a young adult with gouty arthritis by cross team nursing

WANG: Hsuan-Min

Introduction

In this study, a young adult with gouty arthritis was treated with three knee arthroscopic debridements. Long term gouty arthritis resulted in his lowers limb dysfunction, which serious impacted his work and life. The intensive surgery still required long-term rehabilitation, which led to negative emotions and anxiety.

Purpose/Methods

The nursing period was from May 20 to August 31, 2020. Based on Gordon's 11 item functional assessment, the data were collected by using direct care, interview and follow-up after discharge. It was found that the patients had health problems such as "health maintenance ability change", "physical activity dysfunction" and "anxiety". Using cross team professional cooperation to help the gout patients get proper treatment and follow-up, and promote the correct implementation of diet control; In addition, rehabilitation exercise was designed, mainly including muscle strength training, joint ROM exercise, gradually increasing the intensity of rehabilitation exercise, so as to increase the muscle strength of lower limbs and improve the joint function; During the period of care, listening, accompanying, assisting in problem solving and preparing for discharge inspection can relieve the anxiety of the case.

Results

After cross team care, surgery and drug treatment, the uric acid value of the patients decreased from 11.4mg/dl to 4.1mg/dl. The walking distance from 15 meters with the use of walker to walking 50 meters with the use of one cane. Due to the gradual recovery of discharge tracking and activity function, confidence of the case was strengthened and anxiety was relieved.

Conclusions

Based on literature review and cross team care, the gout control and knee joint function of the case were significantly improved. The case was in the middle of life. Due to long-term disease, many negative emotions were generated. Active care and problem solving promoted physical, mental and spiritual health, which was the same as the health promotion spirit of HPH.

Contact: WANG Hsuan-Min

Dalin Tzu Chi Hospital

622401 Chiayi County, perfectmeteor@gmail.com

Development of an Acute Coronary Syndrome Self-Management Questionnaire

YANG Yi-Chun, WANG Hsiang-Ping, CHIANG Tsay-I, WU Bao-Tzung, CHANG Kuang-Hsi

Introduction

As the primary source of death and disability, cardiovascular diseases are expected to cause 22.2 million global deaths each year by 2030. Of all cardiovascular diseases, acute coronary syndrome (ACS) carries the highest mortality rate. In addition, not only is the disease's onset manifesting at younger ages, but the recurrence rate is also increasing year-on-year. Although adjusting lifestyles and reducing risk factors can prevent the onset or progression of cardiovascular diseases, it remains unclear how specific tools can be applied to evaluate the degree of patients' self-management of the disease. The purpose of this study was to develop an acute coronary syndrome self-management questionnaire, thereby providing references for individual care in the future.

Purpose/Methods

An in-house "Acute coronary syndrome self-management questionnaire (ACS SMQ)" was developed through a literature review and via empirical care. The questionnaire was divided into two parts, encompassing "disease cognition" and "behavior compliance." The internal consistency and the construct validity of the questionnaire were verified by Cronbach's α and exploratory factor analysis (EFA), respectively. This study was approved by the Institutional Review Board (IRB) with a project number of 109042. The research period ranged from January 2020 to December 2020.

Results

Based on the experts' recommendations, the initial 19 items in the ACS SMQ were expanded to 29 items, including 19 questions on disease cognition and 10 questions on behavior compliance. Items in the questionnaire were scored via a 5-point Likert scale, while negative questions were marked via reverse scoring. The EFA scores were 0.561-0.866 for questions concerning disease cognition and 0.579-0.964 for those concerning behavior compliance.

Conclusions

In this study, an ACS SMQ was developed so as to assess patients' disease cognition, as well as their compliance in controlling the associated risk factors. Results from the first 30 surveys indicated that the internal consistency and the construct validity of the questionnaire were somewhat representative. Therefore, the questionnaire was further applied to subsequent investigations, the results of which would be analyzed, summarized and categorized for use as the basis for future care evaluation.

Contact: YANG Yi-Chun

Tungs' Taichung MetroHarbor Hospital
Taichung, milky521208@gmail.com

Using multimedia health education tools to enhance disease awareness of patients with acute coronary syndrome

YANG Yi-Chun, CHIANG Tsay-I, WANG Hsiang-Ping, WU Bao-Tzung

Introduction

Acute coronary syndrome has the highest mortality rate, and 50% died before arriving at the hospital. In clinical care, it has been found that patients often delay seeking help due to a lack of disease awareness. Research has noted that "time for helping with chest pain" and "NTG emergency medicine" are the least understood. Therefore, researchers want to use multimedia health education tools to strengthen the motivation of patients to learn about ACS.

Purpose/Methods

In this study, we used quasi-experimental one-group before- and after-tests, and the data were collected from January 2020 to December 2020. Patients with ACS were intentionally selected as the study participants. The sample size was estimated by G power for statistics. Structured questionnaires were implemented before, one month, and three months after the health education program intervention as research tools. SPSS 17 was used for statistical analysis. Individualized inpatient bedside health education was provided, and patients' disease awareness was enhanced through multimedia methods such as health education manuals, video playback, and so on.

Results

A total of 38 cases were analyzed in this study, there was a significant difference in disease cognition before and after the intervention plan ($F=97.083$, $p<.001$); scores one month after the interventional health education program were higher than those three months after the intervention, which were higher than the those prior to the intervention. The score of "ACS symptom recognition" increased from 21.1% before the interventional health education program to 100% one month after the interventional health education program, and continued to be 100% at three months. The "NTG medication concept" score increased from 18.4% before the interventional health education program to 82.9% after the interventional health education program, and it further increased to 100% in three months.

Conclusions

In this study, 89.9% of ACS patients were suffering from the disease for the first time. Their scores for "ACS symptom recognition" and "NTG medication concept" were the worst among disease cognition categories, which was consistent with the research findings. Therefore, it is very important to provide patients with correct and reliable health education information that they can use in their lives. Such a program can be extended to the community in the future to strengthen the public's understanding of ACS.

Contact: YANG Yi-Chun

Tungs' Taichung MetroHarbor Hospital
milky521208@gmail.com

Multi-Professional Workshop to Improve Diabetes Management at the Herzfeld Rehabilitation Geriatric Medical Center

ORLEV Dario, KNOTOFSKY Omri, BROMBERG Noga

Introduction

The Herzfeld Geriatric-Rehabilitation Medical Center of the Clalit Health Service Organization, the first of its kind in Israel to receive official recognition from HPH, is characterized by multiple background diseases, including diabetes. Managing diabetes requires many lifestyle changes: medical follow-up, glucose tests, taking medication, dietary changes and exercise. Many find it difficult to manage diabetes, and risk compromising quality of life, complications and even mortality. A multidisciplinary approach including active and behavioral/motivational practice is known to be more effective in creating lifestyle change. As part of the organizational and HPH strategy promoting quality, available and humane medical services, a multidisciplinary workshop was initiated to improve compliance and adherence.

Purpose/Methods

The workshop takes place during the patient's rehabilitative hospitalization and includes 6 45-minute group sessions, for 3/6 weeks among 6-12 participants. Participants: People with type 1/2 diabetes (and their companions), Hebrew speakers, referred by a nurse/physician. Staff instructors: physician, nurse, diabetic educational and assistant physiotherapists, nutritionist, social worker, psychologist, pharmacist and occupational therapist. The workshops enable dialogue with participants along with physical activity instruction and educational material on diabetes. Individual consultation is also offered.

Results

This is an innovative and unique initiative, empowering the patient, with a comprehensive view of his health. To date, 4 workshops have been held with 8-12 participants. Ethical approval was obtained and research is in progress. A fruitful multi-professional collaboration was created, with added value for both caregivers and patients. In the future, we strive to collaborate with a general hospital and with the community, to conduct a diabetes workshop for outpatient dialysis patients and a workshop for day-hospitalization patients.

Conclusions

During hospitalization, the workshop participants receive multidisciplinary information for managing diabetes and show a willingness to deepen their knowledge and adhere to the guidelines.

Contact: VANDER Tatiana
tatianavn@clalit.org.il

The Association between Prolonged Fasting Period and Gallbladder Polyps in the Middle of Taiwan

CHEN Wei-Sheng, LIU Yen-Tze

Introduction

The symptoms of gallbladder polyps (GBPs) are nonspecific and asymptomatic in many cases. Most GBPs are detected incidentally on abdominal ultrasonography. Although most GBPs are benign, several early gallbladder cancers do present as polypoid lesions. Intermittent fasting as a body fat control strategy became more popular recently. However, prolonged fasting period may result in bile retention. Some experts suggest bile retention could stimulate gall bladder wall and cause GBPs formation. There was no similar study before. We aim to evaluate the association between prevalence of GBPs and prolonged fasting period in Taiwan general population.

Purpose/Methods

This cross-sectional study included 592 individuals who received a health checkup between January 2021 and April 2021 in Changhua Christian Hospital, a tertiary-care medical center in Taiwan. All individuals completed questionnaires about their characteristics, fasting period. Physical examinations were conducted. Blood chemistry test including fasting glucose, lipid profile, HBsAg, Anti HCV, HbA1C, uric acid were performed. The presence of GBPs, fatty liver, gallstones were determined using ultrasonography. We subsequently evaluated the association between fasting period and GBPs' prevalence. Between-group differences were compared using chi-square tests for categorical variables and logistic regression for further analysis.

Results

A total of 592 individuals were included in this study. The prevalence of GBPs for the entire group was 29.0%. GBPs are more common in young-aged group (age < 50 years old) (n=345, 32.8%) than old-aged group (aged ≥ 50 years old) (n=247, 23.9%) (P=0.019). The average fasting period of GBPs group is 12.939±2.04 (n=172), while another group without GBPs is 12.744±1.79 (n=420). GBPs are significantly common in the intermittent fasting group (fasting period ≥ 16 hours, n=20, 42.6%) compared with the control group (fasting period < 16 hours, n=152, 27.9%) (P = 0.034).

Conclusions

The study findings showed a strong positive association between prolonged fasting period (≥ 16 hours) and GBPs' occurrence.

Contact: CHEN Wei Sheng
 Changhua Christian Hospital
 632 Yunlin County, 181740@cch.org.tw

The Effect of NEWSTART Lifestyle Program in Treating Chronic Metabolic Disorders

WENG Pei-Hsuan, LO Chia-Lin, HUANG Hui-Ting

Introduction

Non-communicable diseases are the leading cause of death worldwide, which are strongly related to unhealthy lifestyle. We aimed to prevent and treat chronic diseases by a multi-disciplinary lifestyle intervention program.

Purpose/Methods

Since 1997, Taiwan Adventist Hospital established the NEWSTART Lifestyle Program based on eight fundamental principles: Nutrition, Exercise, Water, Sunlight, Temperance, Air, Rest and Trust. This program provides group learning courses for 13 days in Yuchi, Taiwan. We provide whole food, plant-based diet and teach the students healthy cooking methods. The exercise program includes brisk walking in nature, stretching, and muscle-strengthening activities. We help the students to manage stress by cognitive change and other relaxation techniques. The doctors give lectures for basic principles in disease prevention. The dieticians design personalized menu for the participants, and teach them how to make healthy eating choices. A complete blood metabolic panel is performed before and after the program. After the course, students can maintain contact and strengthen peer support through the NEWSTART social club.

Results

Comparing the tests before and after the 13-day NEWSTART program from 2017 to 2019 (N=321), we observed significantly decreased total cholesterol (211.9 to 189.9 mg/dL), low-density lipoprotein (123 to 113.1 mg/dL), triglyceride (147.5 to 96.1 mg/dL), fasting sugar (104.8 to 96.3 mg/dL), and body weight (65.3 to 62.8 kg) using paired T test (all $P < 0.05$). Many diabetic patients successfully reduced the dosage of glucose-lowering medications by lifestyle change and achieved optimal sugar control. The overall satisfaction to this course was more than 95%.

Conclusions

The NEWSTART program is effective in improving metabolic disorders by building healthy lifestyle habits, increasing health literacy, and empowering the patients.

Contact: WENG Pei-Hsuan

Taiwan Adventist Hospital

10556 Taipei City, yentlweng@gmail.com

The Study of the Correlation between Advance Care Planning Engagement and Cognitive Abilities on Middle-Aged and Elderly People in Outpatient

WU ShWen

Introduction

Advance Care Planning (ACP) is a process that emphasizes to make one's own medical treatment decision when one still has clear awareness and decision-making ability. This study is aimed to realize the relation between ACP engagement and cognitive abilities.

Purpose/Methods

Enrolling patients over 55 years of age in the outpatient clinic of a medical center, using the Traditional Chinese Version of ACP Survey (ACPES-TC) and Mini-Mental State Examination (MMSE) for assessments. The full score of ACPES-TC is 5, and a higher score indicates more complete preparation for ACP. The full score of MMSE is 30, and a higher score indicates more normal cognitive abilities.

Results

A total of 50 patients were enrolled. Their age was 69.00 ± 7.38 . The score of ACPES-TC was 3.00 ± 1.23 , and MMSE score was 28.50 ± 2.50 . The Pearson correlation coefficients of ACPES-TC and MMSE for all people are $r=0.44$, $p=.001$, and these two are moderately and positively correlated.

Conclusions

There is a positive correlation between ACP engagement and cognitive abilities. It is recommended to provide health education for middle-aged and elderly patients as soon as possible, so they can understand and participate ACP when their cognitive abilities are still normal, and increase the signing rate of ACP.

Contact: WU Shu-Wen

hcc@cgh.org.tw

The Effect of applying Diabetes Group Therapy for Chronic Psychiatric Patients with Diabetes

TASI Shu-Fen, LIN Ciou-Ping, LU Huei-Lan, WU Wen-Cheng

Introduction

This study applied diabetes group therapy for chronic psychiatric patients to explore the influence and effect on patients' HbA1C

Purpose/Methods

10 male patients in chronic psychiatric ward, who were diagnosed with schizophrenia that were complicated by diabetes, and whose HbA1C were greater than 7%, volunteered to participate in the group therapy. The participants' average age

was 52. Structural diabetes group therapy, once a week, proceeded 24 times. The therapy contained: knowing diabetes, learning how to choose appropriate diet, established the concepts of taking medication and exercising and implemented, self-monitored blood sugar, shared and reviewed healthy life style, diets and the result of controlling blood sugar. This study discussed the effects before and after the group therapy by assessing HbA1C

Results

The attendance rate was 100%. The result showed the average HbA1C reduced from 7.7% to 6.9%. The pre-test revealed 4 patients' HbA1C were 7.1% to 7.5%, and 6 patients' HbA1C were 7.6% to 8%; the post-test revealed 7 patients' HbA1C were 6.5% to 7%, and 3 patients' HbA1C were 7.1% to 7.5%

Conclusions

In the diabetes group therapy, patients supported each other, changed cognition and behavior, established healthy life and the ability of self-monitoring blood sugar, which showed the group therapy improved diabetes patients' HbA1C effectively and promoted patients' physical and mental health

Contact: LU Huei-Lan

Jianan Psychiatric Center, MOHW
71742 Tainan, 14404@mail.cnpc.gov.tw

The effect of meal environment planning on preventing choking in psychiatric inpatients

PAN Zai-Rong, SHIH Cheng-En, LI Sing-Huei, HUANG Huei-Kuan

Introduction

From 2017 to 2018, the incidence and fatality rate of choking in psychiatric inpatients suddenly increased. After analyzing the current situation, it is found that it is related to the poor planning of the dining environment. The problems include: the eating process is not accompanied by the whole process, which causes the patient to swallow, grab, grab or divide the food quickly, and even eat easily choked food by mistake.

Purpose/Methods

By the implementation of the patient eating assessment and planning the partitioned dining environment, adopt the partitioned feeding process and the high-risk eating area; plan the table top of the high-risk eating area in each acute ward with color waterproof wall stickers to identify the high-risk eating area. For the patients who are rushing and sharing food, they are arranged to eat in the second stage. The patients wait in the multifunctional classroom. After the first stage patients have finished their meals, they will proceed to the second stage of meals. The patients are arranged to sit in the high-risk eating area. A staff member will accompany you throughout.

Results

As a result, the rate of choking incidents 0%, and the rate of choking deaths 0%.

Conclusions

Through environmental planning effective prevention of the occurrence of psychiatric inpatient foreign body choking, improve care quality.

Contact: PAN Zai-Rong

nico7914@gmail.com

Improve the care of nasogastric tube by nursing staff to reduce the rate of nasogastric tube slippage

LI Mei-Fang, LI Siao-Ci, GUO Hua-Jing, LIN Qiu-Ling, CHENG Shiou-Shiung, HSIAO Fang-Lan, CHENG Tsung-Ping

Introduction

The nasogastric tube can provide patients with enteral nutrition, drug administration and stomach decompression. The indwelling of the nasogastric tube will cause discomfort to the patient and increase the probability of extubation. In 2019, the nasogastric tube slippage was the first patient safety notification event in this unit. The nasogastric tube slippage rate in 2019 was 1.2%, which was higher than the total The hospital threshold is 0.27%, which triggers motivation for improvement.

Purpose/Methods

Through education and training, filming of nasogastric tube care videos and changing the fixed materials of nasogastric tube, revising the nasogastric tube care standards, re-drawing the nasogastric tube health education leaflet and restricting the health education teaching videos and upgrading the nasogastric tube for nursing staff Caring.

Results

From January 2020 to December 2020, the rate of nasogastric tube slippage dropped from 1.20% to 0.59% through the improvement of the nursing staff's nasogastric tube care.

Conclusions

The nasogastric tube-related education and training, videos, production of health education leaflets and other related measures can effectively prevent the nasogastric tube from slippage and the care of nursing staff and family members become consistent. It can be a reference of care for patients and their family.

Comments

The patient has a self-extraction of the nasogastric tube. Because he does not understand the importance of nasogastric tube indwelling, it is recommended that when the nasogastric tube is placed, the doctor should first inform the purpose of nasogastric tube indwelling and reset the discomfort to reduce the nasogastric caused by lack of knowledge Tube slip event occurred.

Contact: HSU Jason

Chang Bing Show Chwan Memorial Hospital
Changhua, showchd@gmail.com

Using Taiwanese Hokkien language QR code online to improve pre-operative nursing instruction for elderly in outpatient clinic department

LIN Chiao-Yu, CHIEN Mei-Chen, HUANG Li-Ching, TSAI Yi-Fan

Introduction

Our unit is an outpatient clinic department of a regional teaching hospital in Taipei, Taiwan. We found that 72.4% of the elderly were using Hokkien as the main language, and our unit have 48.2% of nurses were not good at speaking Hokkien. Therefore, there were 10 cases of delayed surgery, and satisfaction rate was 60.5%. The purpose of study was to improve the service quality by adding new Hokkien language education videos to sending right message to the elderly before operation.

Purpose/Methods

The study period is from July 2019 to December 2020. Interventions are follow as below: 1. Make a Hokkien pre-operative nursing instructional video (e.g. hemorrhoids, cataract surgery). 2. Set up training courses about Hokkien language education for nurses. 3. Teaching caregivers to watch videos with QR code on mobile phones, and explain the content of videos at the same time. 4. After watching the video, the quiz and satisfaction questionnaire will be linked to know the effectiveness and satisfaction of learning.

Results

A total of 265 over 65 years of age received pre-operative nursing instruction from the Taiwanese Hokkien language QR code online video. Our result showed that after learning effectiveness were reached to average 87.5 points, and the satisfaction rate was 100%. We have found no cases of delayed surgery due to incomplete preparation before the operation.

Conclusions

After through the learning of the Taiwanese Hokkien language QR code online video, the outpatients can receive the correct pre-operative care knowledge and the learning effect was so well. The pre-operation preparation can be successfully completed, thereby improving the quality of medical care for the elderly.

Contact: TSAI YI-FAN

Taipei City Hospital, Young Ming Branch
10453 Taipei, b1717@tpech.gov.tw

Rebuilding Social Support Network: Social Worker Intervention in AIDS Hospitalization Cases

LIANG Shiow-Ching, YEN Chia-Chi, LIN Chun-Yu, HUANG Ming-Ren

Introduction

With the diagnosis of AIDS and with the progress of the disease, different psychological pressures and socio-psychological needs arise, facing multiple and complex problems and dilemmas, and often cannot rely on a single system to resolve their dilemmas. People living with HIV account for 5% of cases reported by the social work office of our hospital. This article hopes that the experience of the social work department will be used to accumulate the experience of the social work department as a reference for future education and training.

Purpose/Methods

This study uses the content analysis method, from the 2017 to 2018 social worker case records, to screen for HIV infection cases for systematic analysis. Analyze the five major aspects of referral reasons, individual sociodemographic data, social and psychological assessment, problem types, and treatment services, identify the induction categories and code them, assign data to processing data, and review service models to outline the treatment of social workers Look.

Results

There are 11 cases in this study. They are all male inpatients, 41 to 60 years old, nomads (63.64%), poor family relations (82.82%), and lack of external support (90.91%). The economic types (72.73%) had the most problem types, followed by care and resettlement problems (36.36%). Individual cases generally lack family and external support. The Social Work Department encountered the most care (90.90%) in providing care, providing social resources, and economic assistance.

Conclusions

Faced with the multiple dilemmas of treatment and life, people living with HIV / AIDS need urgent attention to resources and provide timely assistance. Social workers carry out psychosocial assessments, take stock of resources, focus on the connection of social resources, construct a case support network, and social networks to jointly assist the difficulties of cases can indeed effectively solve the problems arising during hospitalization.

Contact:

allamia@mail2000.com.tw

A Retrospective Cohort Health Analysis of Fresh Compulsory and Voluntary Military Service in Taiwan

SYU Yu-Fong, LIN Yu-Pei, YEN Chia-Chi

Introduction

Taiwan is an island country as a chief hub for the Pacific to enter Asia and very important for economy, trade, transportation and strategic position in East Asia. The army is very much needed to

maintain the safety of people's lives and property. Therefore, we have written the current retrospective article from the fresh compulsory and voluntary military service in Taiwan. Our study aimed to explore the military health between compulsory and voluntary military service.

Purpose/Methods

The fresh compulsory and voluntary military service underwent the military service health examination from January 2020 to December 2020 at Kaohsiung Municipal Min Sheng Hospital, Kaohsiung (KMSH), Taiwan. Excluding missed inspections, total 2711 compulsory military service and 54 voluntary military service were enrolled. These military services were recorded ages, hematology & biochemistry, urine routine, and chest X-ray (CXR) examination. All examination were recorded and analyzed by one-way analysis of variance (Statistical Package for Social Sciences) for evaluation of immunity, hemoglobin, dysglycemia, liver function, renal function, heart & lung function, and sexually transmitted diseases (STDs).

Results

The prevalence of anemia with microcytic predominant (2.25% vs. 5.56%) and dysglycemia (2.14% vs. 12.96%) were lower in compulsory than voluntary military service. In contrast, the prevalence of impaired liver function (15.56% vs. 7.41%), impaired renal function (34.82% vs. 20.37%), abnormal CXR (13.94% vs. 7.4%), and STDs (0.37% vs. 0%) were higher in compulsory than voluntary military service.

Conclusions

In our study, these differences may be mainly attributed to the average ages of anemia, impaired liver function, and abnormal CXR were significantly elder in compulsory than voluntary military service ($p < 0.05^*$), because of most immature are students under regular life style without smoking in Taiwan. However, more studies to identify the differences between fresh compulsory and voluntary military service in the military health examination are important.

Contact: HUANG hsin-jou

Kaohsiung Municipal Min-Sheng Hospital
Tainan, hsinjou1224@gmail.com

Distraction Therapy Reduces Anxiety and Analgesic Use during Extracorporeal Shock Wave Lithotripsy, Kaohsiung Municipal Min-Sheng Hospital Experience

HO Chia Ling, CHO Mon Der, YEN Chia-Chi

Introduction

Extracorporeal shockwave lithotripsy had become mainstream for treating urolithiasis. Nevertheless, some patients still complaint about the close space and noise when the lithotripter is working, as well as focal tenderness. We introduced distractive therapy during lithotripsy in December 2018, including musical therapy, aromatherapy, visual distraction, and atmosphere change to distractive patients.

Purpose/Methods

Patients were prospectively collected from 2018/12/01 to 2019/11/30 after we added a tablet with a Bluetooth headset, fragrance machine, and atmosphere light, for a total of 1,192 patients in the study group. The control group consisted of patients recruited from 2018/01/01 to 2018/11/30, a total of 283 patients. The outcome measurement included stone passage or not, stone size decrease, downward movement length on day 28 after ESWL treatment, and need for further management. Musical therapy was set up by a musical therapist. For the aromatherapy, we chose lavender essence oil and rose essence oil in accordance with a licensed aroma therapist's suggestion for better relieving effect.

Results

The average age of the treatment group was 52.5 ± 12.35 , with a male to female ratio of 6.74 to 3.26; the control group was 54.34 ± 11.73 , with a male to female ratio of 6.53 to 3.47. The study group reduced analgesic use by 42% and increased treatment energy by two scales. Stone passage rate was slightly higher in the study group, and the stone size decrease percentage was higher in the study group, 38.42% compared to 26.74% $p=0.034$.

Conclusions

Distractive therapy during ESWL can help reduce analgesic use and increase treatment energy use, which may lead to better outcomes of ESWL treatment.

Contact: HUANG hsin-jou

Kaohsiung Municipal Min-Sheng Hospital
Tainan, hsinjou1224@gmail.com

Using a Masturbation Device in Penile Rehabilitation Program in Treating Age-related Erectile Dysfunction in Widowers

CHO Mon Der, YEN Chia-Chi

Introduction

The widowhood effect is a critical condition among aging people. Recent longitudinal studies have demonstrated that the excess mortality of widowhood among the elderly is 15 to 30% increase. The key to passing through this critical situation may be finding another relationship. However, finding a new relationship at such an advanced age can be difficult, especially if they also having Erectile dysfunction. Our study aims to set up an effective treatment and rehabilitation protocol for widower patients after bereavement.

Purpose/Methods

This prospective observational study records widower patients receiving erectile dysfunction treatment. The primary study endpoint is having successful sexual intercourse, while the secondary endpoint is finding another relationship. We observed a total of 37 widowers between 2017/1/1 and 2019/06/30 in this study. Patients' past histories, including systemic diseases, were recorded, and we also recorded International Index of Erectile Function (IIEF-5), International Prostate Symptom Score (I-PSS), Androgen Deficiency in Aging Men (ADAM) at the first visit and every three months.

Results

Of the 26 patients using a masturbation device (study group), the median age was 65 and in the patients that did not use the masturbation device (control group), the median age was 64. Patients in the study groups recorded better improvement in IIEF-5 scores than the control group, mean 11.5 vs. 7.8. In the study group, 24 patients found a stable relationship. In the control group, six patients found another stable relationship.

Conclusions

Compared to patients without device self-training, patients with rehabilitation training showed more confidence about maintaining an erection during intercourse, which may thus help them find another relationship more easily.

Contact: HUANG hsin-jou

Kaohsiung Municipal Min-Sheng Hospital
Tainan, hsinjou1224@gmail.com

Analyze the correlation between muscular endurance and the incidence of falls in psychiatric patients

HSIAO Feng-Chi

Introduction

Given that patients in the psychiatric department of hospitals have decreased muscle endurance due to long-term hospitalization, the study hopes to encourage patients with chronic diseases to increase their participation through functional treatment activities in the ward, so as to increase their muscle endurance and reduce the ration of falls.

Purpose/Methods

Psychiatric patients were evaluated for lower limb muscle endurance before the activity, and again after 12 weeks. 1. Make a special anti-fall exercise video for the psychiatric department and promote it, and increase the weekly exercise to twice a week, each time for 50 minutes. 2. Make a collection card for the anti-falling exercises to exchange small gifts.

Results

The statistical fall rate of chronic patients was 0.12% before the activity, 0% during the improvement activity, and 0.01% after the improvement activity.

Conclusions

1. Muscle endurance assessment has self-recognition factors, so long-term tracking of muscle endurance and multiple assessments are required to achieve a more objective comparison. 2. Future recommendations should take into account differences in patient cognition, use more objective and quantitative data sampling methods.

Comments

1. Add anti-fall exercises to daily exercises, and coordinate with collection card to encourage patients to participate in activities. 2. The improvement of muscular endurance requires long-term intervention before it is effective.

Contact: HSU Jason

Chang Bing Show Chwan Memorial Hospital
Changhua, showchd@gmail.com

Poster Session 10: Supporting patient behavior change and healthy lifestyles: Addictive behaviors

The efficiency of the reducing alcohol damage project in New Taipei City

FANG Chun-Kai, LIN Chia-Hua

Introduction

Problem drinking is an important health issue and related to potential public damage. Since 2006, Taiwan central government began to provide financial allowance for medical expenses to quit or reduce drinking. MacKay Memorial Hospital has begun to support from New Taipei City Government to implement the reducing alcohol projects every year since 2007. Combining the BRENDA model and case management system, MacKay Suicide Prevention Center (SPC) accumulate a lot of experiences in treating alcohol use disorders (AUD). The article is to report the efficiency of the reducing alcohol project.

Purpose/Methods

All participants would be transferred from outpatient clinics of different departments, inpatients of different departments, and social welfare departments. MacKay SPC members included psychiatrists, nurses, counseling psychologists, clinical psychologists, and social workers. Psychiatrists provide outpatient clinic services for all participants. Excluding psychiatrists, all staff were as the case managers at the same time. All alcoholics were assessed with the Alcohol Use Disorders Identification Test (AUDIT) to determine the severity of alcohol consumption and followed 3 month later. We report the results of the project in 2019.

Results

There were 253 patients with AUD accepting the services, including 141 patients enrolled in 2018 and 112 enrolled in 2019. All they received 1,478 times of individual psychotherapy, 232 times of group psychotherapy, 175 times of family therapy, and 6,760 times of case management by calling out services. In 2019, there were 138 participants completed services. Before the project, there were 82% dangerous drinking, 18% harmful drinking, and 0% normal drinking by the AUDIT survey; after the project, there 13% dangerous drinking, 45% harmful drinking, and 42% normal. In the reasons of ending services, only 10.5% (n=16) were rejection or loss contact.

Conclusions

Under the reducing alcohol project, we found high efficiencies to quit and reduce drinking by the BRENDA model, case management system, and psychiatric outpatient clinics. By the standardized clinical pathway and systematic services, problem drinking would be changed by health care organizations.

Contact: FANG Chun-Kai
MacKay Memorial Hospital
Taipei, chunkai.fang0415@gmail.com

The efficiency of the reducing alcohol damage project in Taipei City

FANG Chun-Kai, LIN Chia-Hua

Introduction

Problem drinking is an important health issue and related to potential public damage. MacKay Memorial Hospital has begun to support Taipei City Government to implement the reducing alcohol projects every year since 2017. Combining the BRENDA model and case management system, MacKay Suicide Prevention Center (SPC) accumulate a lot of experiences in treating alcohol use disorders (AUD). The article is to report the efficiency of the reducing alcohol project.

Purpose/Methods

All participants would be transferred from outpatient clinics of different departments, inpatients of different departments, and social welfare departments. MacKay SPC members included psychiatrists, nurses, counseling psychologists, clinical psychologists, and social workers. Psychiatrists provide outpatient clinic services for all participants. Excluding psychiatrists, all staff were as the case managers at the same time. All alcoholics were assessed with the Alcohol Use Disorders Identification Test (AUDIT) to determine the severity of alcohol consumption and followed every 3 months. We report the results of the project in 2019.

Results

There were 124 patients with AUD accepting the services, including 57 patients enrolled in 2018 and 67 enrolled in 2019. All they received 709 times of individual psychotherapy, 110 times of family therapy, and 3,035 times of case management by calling out services. In 2019, there were 69 participants completed services. Before the project, there were 83% dangerous drinking, 16% harmful drinking, and 1% normal drinking by the AUDIT survey; after the project, there 9% dangerous drinking, 36% harmful drinking, and 55% normal. In the reasons of ending services, only 8.7% (n=6) were rejection or loss contact.

Conclusions

Under the reducing alcohol project, we found high efficiencies to quit and reduce drinking by the BRENDA model, case management system, and psychiatric outpatient clinics. By the standardized clinical pathway and systematic services, problem drinking would be changed by health care organizations.

Contact: FANG Chun-Kai
MacKay Memorial Hospital
Taipei, chunkai.fang0415@gmail.com

Finding and transferring patients with alcohol use disorders from drunk drivers- cooperate between Motor Vehicles Office and general hospital

FANG Chun-Kai, LIN Chia-Hua

Introduction

Drunk drinking is a potential public damage and an illegal behavior in Taiwan and the other countries. Even been arrested, almost drunk drivers have no motivation to change their behaviors. Under Taiwan National Project to Construct Alcohol Prevention Network which practiced by MacKay Suicide Prevention Center (SPC) authorized by the Ministry of Health and Welfare, MacKay SPC cooperated with local Motor Vehicles offices to find and transfer alcoholics to medical services since 2015. On April 2019, MacKay SPC established a fixed Alcohol Knowledge Care Counter in Banqiao Motor Vehicles Office. The report present how we practice the project.

Purpose/Methods

MacKay SPC practiced the project under the SPIRT model (Screening, Brief Intervention, and Referral to Treatment). All drunk drivers had to receive two-hour lectures to understand alcohol use disorders. The professionals of speakers included psychiatrist, psychologists, social workers, and nurses. In lectures, all drunk drivers had to complete the CAGE questionnaires and score by themselves for enhancing self-awareness. If they wanted more information or want to receive help, they could go to the service desk (before April 2019) or Alcohol Knowledge Care Counter to receive 20-min counseling. After counseling, we will transfer possible alcoholics to MacKay psychiatric outpatient clinics.

Results

In 2019, there were 30 lectures and 1,706 drunk drivers attending two-hour lectures in local Motor Vehicles offices. 537 drunk drivers (31.5%) automatically receiver 20-min counseling after lectures. 48 drunk drivers (2.8%) were transferred to MacKay psychiatric outpatient clinics, and 44 (2.5%) were diagnosed as alcohol related disorders who got more treatment.

Conclusions

In the project, 31.5% drunk drivers concerned their health to search 20-min counseling and 2.5% got reducing alcohol treatment. The project was useful to promote healthy literacy of alcohol use disorders for drunk drivers and found alcoholic for treatment. It could be spread to the other areas or countries for alcohol prevention.

Contact: FANG Chun-Kai
MacKay Memorial Hospital
Taipei, chunkai.fang0415@gmail.com

Case management for illicit drug dependence in a general hospital

FANG Chun-Kai, WONG Sheng-Kai

Introduction

Illicit drug dependence is a severe healthy and social problem. Alternative treatments are available for only some illicit drug, but not for all. For help people who use illicit drugs to quit, New Taipei Government authorized MacKay Memorial Hospital to run the case management system. The article reports the project.

Purpose/Methods

When patients using illicit drugs automatically visited psychiatric outpatient clinics, psychiatrists transferred them to the case manager for following treatment. The case manager collected their personal data and evaluated their motivations and behaviors of illicit drug dependences. The case manager gave feedback to the psychiatrists and followed up these patients.

Results

In 2019, there were 32 patients enrolled, including 28 men and 4 women. All patients were under 50 years old. Among the participants, the first illicit drugs were 6.3% (n=3) of the first-level illicit drugs, 71.9% (n=23) of the second-level, 34.4% (n=11) of the third-level, and 6.3% (n=2) who used two illicit drugs at the same time. The age of their first time to use illicit drugs were all before 30 years old. 74% (n=28) participants expressed the curiosity was the main reason of their first use. After attending the project, 71.9% (n=23) had stopped using illicit drugs.

Conclusions

In Taiwan, only heroin dependence has alternative treatment. The case management system is a useful method to understand necessary data for mental health providers to quit illicit drugs.

Contact: FANG Chun-Kai

MacKay Memorial Hospital
Taipei, chungkai.fang0415@gmail.com

Learned resourcefulness as factors impact on the quality of life among patient with methadone maintenance therapy.

YANG Li-Ling, HUANG C-Y

Introduction

The studies explored that methadone maintenance treatment (MMT) and the learned resourcefulness were able to effectively enhance individual adaptability and there were a higher life satisfaction. Objectives: The purpose of this study was to examine the relationship between the demographic variables and quality of life (QOL), and to compare the effects of learned resourcefulness on the QOL among the heroin addicts receiving MMT.

Purpose/Methods

A cross-sectional correlation design was adopted and totally recruited 200 subjects who receiving MMT from the psychiatric

hospital in southern Taiwan. The structural questionnaires included "Self-Control Scale" and "The World Health Organization Questionnaire on Quality of Life: Short Form--Taiwan Version" (The WHOQOL-BREF--Taiwan Version).

Results

That most subjects were male, single, and average age was 43.52 years old. The overall quality of life, physical health, psychological, social relationships and environment for the four domains of WHOQOL-BREF were moderate level. There were significant differences in satisfaction with the overall quality of life by gender, marriage, job, frequency of detoxification, continue to use drugs and taking methadone regularly. The learned resourcefulness was significantly positive correlated with overall quality of life and four domains of WHOQOL-BREF.

Conclusions

We suggest that the heroin addicts take methadone regularly, and help them transform or internalize as self-control of the learned resourcefulness through job to put an end to the use of heroin as well as to promote the quality of life.

Contact: YANG Li-ling

Kaohsiung Municipal Kai-Syuan Psychiatric Hospital
Kaohsiung, ling1234@gmail.com

Effectiveness of empowering growth narrative groups in drug addicts

CHIEN Ying Chun, HSIAO Han Yi, CHIEN Ya Yu

Introduction

Drug addicts often start using drugs due to curiosity, stress, pain or environment, etc., and makes them have a negative self-identification. The philosophical view of narrative therapy is that the client is the master and expert of his own life. Separate problems from people and externalize them through the therapist's curious exploration, and re-developed a new self-identification and response to difficulties (Huang, 2018). This project hopes to assist drug addicts to explore and organize their careers and lives, and make them have a better understanding of themselves and make further changes in the motivation and behavior of substance abuse.

Purpose/Methods

A total of 15 outpatient drug addicts from 4 groups who participated in the empowering growth narrative groups from January 1, 2019 to December 31, 2020 were collected by Purposive Sampling. The group was a 4-week group meeting for 1.5-2 hours once a week. The basic demographic data and substance use history, medication craving scale, self-efficacy scale, change stage scale, quality of life scale, etc. were used before and after the group intervention to observe whether there are significant differences.

Results

The results show significant differences that the addicts participating in the group have confidence in refusal of drugs ($p=.028<.05$) and the psychological category ($p=.049<.05$) and social category ($p=.006<.05$) in the quality of life. There is a tendency to change in self-esteem, self-efficacy, and drug cravings.

Conclusions

This study show that the intervention of the groups has significant differences in drug addicts' confidence in refusal and quality of life. However, although self-esteem, self-efficacy and drug cravings have a tendency to change, they have not reached significant levels. The possible reason is that the total number of cases received is relatively low and the number of treatments is only four. Therefore, in future plans, we can increase the number of cases received, and increase the number of treatments. Provide drug addicts with opportunities to change their self-esteem, self-efficacy, craving for drugs, and confidence in refusal to use drugs.

Contact: LU Huei-Lan

Jiannan Psychiatric Center, MOHW
71742 Tainan, 14404@mail.cnpcc.gov.tw

Poster Session 11: Supporting patient behavior change and healthy lifestyles: food, nutrition and diet

Analysis of diet status of hospitalized patients

LIN Yu-Hui, LIN Chun-Yu, HUANG Ming-Ren, YEN Chia-Chi

Introduction

The hospital's nutrition department provide a variety of diets suitable for patients, hoping that a good nutritional basis for patients can reduce the infection rate and shorten the length of hospital stay. By understanding the dietary status of inpatients, as a reference for dietitians to adjust menus and staff to cook patient diets, it is hoped that improving the nutrition and taste of the diet can better meet the needs of patients.

Purpose/Methods

Taking the inpatients as the survey object, the daily ordering records in the diet system were collected to collect data and conduct statistical analysis. Patient diets are divided into ordinary meals and therapeutic meals. Ordinary meals are divided into general diet and vegetarian diet, and therapeutic meals are divided into liquid diet, semi-liquid diet, minced diet, disease diet (e.g. diabetic diet, low salt diet, protein restriction...) and other meals, such as a total of 15 kinds of meals.

Results

During the survey period from 2020.1.1-12.31, the statistical analysis results are as follows: ordinary meals 43.1%, therapeutic meals 56.9%. 94% of regular diet and 6% of vegetarian diet in ordinary meals; 57.9% of semi-liquid diet, 13.0% of diabetic diet, 12.0% of minced diet, 11.0% of liquid diet, and fewer other diet in therapeutic meals.

Conclusions

The survey found that the majority of inpatients' diets were therapeutic meals. Among the therapeutic meals, semi-liquid diet, diabetic diet, and minced diet were the top three. The

highest proportion of semi-liquid diet in therapeutic meals may be related to the majority of elderly patients in the hospital. Therefore, the menus and cooking methods can be adjusted to meet the needs of patients based on the dietary characteristics of elderly patients whose functional deterioration is difficult to chew and swallow.

Contact: LIN yu-hui

Kaohsiung Municipal Min-Sheng Hospital
Kaohsiung, l810853@yahoo.com.tw

Effects of Nutrition Education on Healthy Eating Behaviors and Anthropometric Parameters in Older Adults of the Community

SU Yi-Jing, WANG Ying-Fang, YANG Yu-Ru, CHAN Hsin-Lung

Introduction

According to the report written by the National Development Council (Taiwan), Taiwan has entered the stage of an aged society in 2018. It is estimated that Taiwan will become a super-aged society by 2025, due to a falling birth rate and a fast-aging population. How to "healthy aging" has become an important social issue. The purpose of this study was to investigate the effects of nutrition education on healthy eating behaviors and anthropometric parameters in older adults of the community.

Purpose/Methods

There were 10 nutrition and health education classes held by registered dietitian at the community activity center. The topics included balanced diet, skills of healthy eating out, prevention of sarcopenia, etc. Each class combined with half an hour nutrition lecture and half an hour hands-on activities. And we measured the grip strength and anthropometric parameters of the older adults and asked them to answer a knowledge and behavior questionnaire at the first and the tenth class.

Results

15 older adults participated in this program. The attendance rate of more than 7 classes is 80%. The grip strength of the older adults was improved after 10 classes ($p < 0.05$). The correct rates of answering nutrition knowledge were improved as well after education intervention ($p < 0.05$). The scores of having healthy eating behaviors at the survey questionnaire of final class were higher than the survey questionnaire of first class ($p < 0.05$).

Conclusions

Nutrition knowledge, grip strength and eating behaviors of the older adults improved after receiving nutrition intervention. Combining nutrition education with hands-on activities can make the older adults in the community absorb nutrition knowledge more effectively.

Contact: SU YI-JING

yijing810605@hotmail.com

Collaboration for Health Promotion by Pharmacist and Dietitian at HPH Pharmacy

FUJISHIRO Maki, KAKE Hisami, FUJINO Mami, TSUMORI Miho, HOJO Yuya, MATSUMURA Naomi, HIROTA Noritake

Introduction

Aozora Pharmacy joined International HPH Network in January 2015 as the first pharmacy member in Japan. As one of various HP for patients and community, a dietitian has been positioned since October 2017 and free Diet Counseling is provided twice a week.

Purpose/Methods

The collaboration with dietitian was reviewed for the duration of 18 month from its start, and the following three issues were found: 1) communication between dietitian and pharmacists was not sufficient, 2) information from the Diet Counseling was not used when providing medication instruction by pharmacists, 3) nutrition related products sold at the pharmacy needed to be revised. After some internal efforts for improvement, the result was reviewed.

Results

To improve information sharing, we assigned a pharmacist for the Diet Counseling. This brought up the monthly average number of counseling from 11.8 to 16.7. Also, information from the Counseling was documented on medication records, allowing pharmacists to provide medication instruction with higher quality. For nutrition related products, the line-up was renewed, and spot signs were added for easier understanding, increasing the sales as well.

Conclusions

Unlike pharmacists, dietitian is skilled to observe nutrition condition and realize daily needs of clients. Oftentimes, information from such observation also suggests Social Determinants of Health. By utilizing the information, pharmacy/pharmacists can provide a higher quality medication control from pharmaceutical perspective. Thus, the role of dietitian is essential for a pharmacy to enhance health promotion. For HPH pharmacy, collaboration with dietitian shall better be encouraged further.

Contact: HIROTA Noritake

AOZORA Pharmacy, Osaka Pharmaplan
555-0024 Osaka, n-hirota@faruma.co.jp

The Application of Cloud Platform to Analyze Efficiency of „My Plate of Taiwan” Curriculum: Based on employees of Taiwan Adventist Hospital (TAH)

CHAO Yu-Hsien, CHEN Jiyuen-Tieng, JEN Kai-Lin, TSAI Hsiao-Jung, LIN Shu-Chi, HUANG Hui-Ting

Introduction

More and more people had imbalance eating habits in Taiwan. And such dietary habits might cause nutritional disorder and increase risk of diseases. In 2018, the Health Promotion Administration published a "My Plate of Taiwan", which includes the concept of portion-control and six major food groups. Employees were accustomed to using smartphones for communication, so we also used this tool for curriculum assessment. To improve employees' knowledge of preparing healthy meals, we used "My Plate of Taiwan" in health education.

Purpose/Methods

In 2019, we held employee health education. At first, dietitians designed interactive teaching used Food Poker that we made by "My Plate of Taiwan". Second, we divided 4~5 employees into groups in curriculum, and each group was assigned to one Food Poker. Dietician discussed how to prepare healthy meals with employees in curriculum. Participants had to finish pre-and post-tests. There were 10 questions in this questionnaire, and data was collected through online-platform. The data was analyzed by paired t-test.

Results

We held a total of 4 events, involving 237 staffs who finished both pre-tests and post-tests. Data showed that employee s' score of "My Plate of Taiwan" significantly increased from 75.2 to 80.2($p<0.01$). After the curriculum, employee s' accuracy about portions including milk, fruits and nuts were improved to 16.5%, 19.4% and 7.2%. The accuracy about classification of food-groups including whole-grain and beans also improved to 6.8% and 10.1%.

Conclusions

In conclusion, employee s can realize six major food groups and the portion of foods through the curriculum of "My Plate of Taiwan". No matter staffs cook at home or eat outside, this can help to achieve to healthier and nutritionally balanced diets.

Contact: CHEN Jiyuen-Tieng

Taipei City, 147570@tahsda.org.tw

The relationship between changes in milk and dairy intake and improvement of cardiovascular risks

CHOI Saegyeol, KIM Hyekyeong, KIM Yuri

Introduction

As the mortality of cardiovascular disease grows, the severity of the condition worsens, with ischemic heart disease and stroke being the primary and second causes of death, respectively. Improvement of dietary habits is one of the strategies to prevent cardiovascular disease, with research indicating that those who consume a lot of milk and dairy products had a decreased risk of dying from the disease. The purpose of this study is to identify the effect of changes in milk and dairy intake on risk factors of cardiovascular disease.

Purpose/Methods

We used data from the "Healthy Life Plan" intervention study, which is a lifestyle improvement program aimed at preventing cardiovascular disease. The subjects were 296 people, respectively, in the intervention group and the control group. Women accounted for 62.8% of the intervention group and 59.5% of the control group. The average age was 53.80 years in the intervention group and 53.72 years in the control group. Consumption of Milk and dairy products was measured by self-report, and body measurements and blood tests were taken before and after the intervention. Differences in cardiovascular disease risk resulting from changes in milk and dairy intake before and after intervention were investigated.

Results

In people with increased milk and dairy intake after intervention, there was a high possibility of improvement in low HDL cholesterolemia than those who continue not to drink ($P<0.01$). Both those who increased and who decreased their intake also had a possibility of improving impaired fasting glucose ($P<0.01$). However, when it comes to improving hypertriglyceridemia and prehypertension, those who increased their milk and dairy intake were less likely to improve the diseases than those who did not drink milk and dairy products continuously ($P<0.01$).

Conclusions

This study shows that as milk and dairy intake increases, the risk of cardiovascular disease is likely to improve, indicating that dietary improvements can also lower the risk of cardiovascular disease. Further study is required to objectively measure the intake of milk and dairy products and analyze the improvement of cardiovascular disease risk factors depending on the level of intake.

Contact: CHOI SAEGYEOL

Ewha Womans University
03760 Seoul, sae_gyeol@naver.com

The effect of milk and dairy products intake on cardiovascular disease risk factors in mid-aged adults: a meta-analysis of intervention studies

KIM Jiye, KIM Soo Kyoung, KIM Hyekyeong, KIM Yuri

Introduction

Milk and dairy products intake can help to reduce and prevent cardiovascular disease(CVD) risk factors. Mid-aged adults had a higher risk of cardiovascular disease, but they consumed less milk and dairy products. Therefore, we aimed to provide the most recent evidence of the effect of milk or dairy consumption on improving CVD risk factors in mid-aged adults by conducting a meta-analysis.

Purpose/Methods

Cochrane CENTRAL, PubMed, EMBASE, KoreaMed, KMBASE, KISS, NDSL, and KISTi were searched for articles published from January 2010 up to June 2020. Randomized and quasi-experimental studies with mid-aged adults controlled with increased milk or dairy intake intervention were included. We used CMA 3.0 to conduct a meta-analysis of the mean differences in pre-post changes in CVD risk factors between intervention and control groups from all eligible studies.

Results

A total of 16 studies were included in the final analysis. There was an improved change in systolic blood pressure(BP) (-0.19 , -2.85 to 0.48 mmHg/dL, $p<0.05$) for increased milk or dairy intake interventions, but no significant change in total cholesterol (-0.03 , -4.62 to 1.24 mg/dL), triglycerides (-0.05 , -5.37 to 0.35 mg/dL), high density lipoprotein ($+0.12$, -4.34 to 2.48 mg/dL), low density lipoprotein (-0.06 , -4.92 to 0.88 mg/dL) and diastolic BP (-0.04 , -4.29 to 0.80 mmHg/dL). Changes in blood glucose (0.18 , -9.46 to 6.38 mg/dL), weight (0.03 , -0.74 to 0.94 kg), waist circumference (0.07 , -1.66 to 2.94 cm) and body mass index (0.06 , -1.76 to 1.64 kg/m²) were not improved and significant for interventions. Qualities of evidence of all factors were insufficient, since all of studies were inconsistent.

Conclusions

Increased milk or dairy consumption in mid-aged adults had an effect of lowering systolic BP. While the results on other CVD risk factors were inconclusive, there was some indication that milk or dairy products consumption improved blood lipid levels and diastolic BP. To demonstrate sustained effects on CVD risk factors of milk or dairy food intervention for mid-aged adults, more consistent studies are required.

Contact: KIM JIYE

Department of Health Convergence, Ewha Womans University
03760 Seoul,
ydgkgk@naver.com

Personalized healthy plate

TSAI Yi-Ting, CHANG Fu-Sheng

Introduction

Modern people are busy at work so they often eat outside. Checking everyone's daily plates almost hides the crisis of high oil, high sugar, high sodium and low fiber. Due to long-term intake of unbalanced diet, our body is threatened by chronic diseases, including diabetes, high blood pressure, high blood fat, and obesity.

Purpose/Methods

According to the results of the Health Promotion Administration, Ministry of Health and Welfare's 2013-2016 National Nutritional Health Change Survey, the average daily vegetable intake of adults aged 19 to 64 in Taiwan is 86%, the fruit intake is less than 2% of 86%, and the dairy intake is less than 1.5 cups. 99.8%, 91% of nuts with less than one serving.

Results

In order to make it easier for the people to achieve a balanced diet, nutrition experts integrate the diet and health needs of the people. Based on Taiwan's "Dietary Dietary Guidelines", the recommended categories and servings in the six main categories of food are then graphically transformed into "My Plate", allowing people to easily take them in proportion, including whole grains, fish, eggs, meat, vegetables, fruits, dairy products, and nuts.

Conclusions

Poor eating habits have gradually triggered the global health crisis. Therefore, the Five Principles of Healthy Eating announced by the World Health Organization in 2019. Establishing good eating habits from an early age through personalized healthy plate can help prevent metabolic syndrome and chronic diseases.

Comments

The high proportion of adults eating out leads to unbalanced nutrition. Individualized health education and consultation with dietitians can reduce the risk of chronic diseases.

Contact: CHIA WEN Lai

Show Chwan Memorial Hospital
CHANGHUA, chc203270@hotmail.com

The Effectiveness of Diversified Community Nutrition Education model to Promoting Healthy Lifestyle in Community

WEN Shang-Yu, YU Hsin-Ting, ZHOU Yi-Ling

Introduction

Due to unhealthy life style could result in health problems, such as overweight/obesity, metabolic syndrome and insomnia. Orenda Psychosomatic Health Management Cooperation, an organization devoting to promote healthy life style, have

launched one-year community health promotion program. Beside of traditional community health education model, we combined "the twenty-four solar terms" with traditional Chinese medicine and nutrition concepts. At the same time, by using online education through communication apps to raise self-health awareness to achieve healthier life style.

Purpose/Methods

We designed an one-year duration community health education with the Chinese 24 solar terms. Workshop includes traditional Chinese medicine, healthy eating skills, acupuncture, and herbal tea targeted for the common diseases of each solar terms. We will set up a seven-day telecommunication counselling section with communication apps after each workshop. We encourage participants to share the experience with newly learned knowledge, and we will provide the suitable answer and knowledge according to each individual case live through the communication apps.

Results

The diversified community education model started from November, 2019. In total, there were 559 people participating the workshops. There were total of 84 online check-ins to share their healthy behavior changes on communication apps. For the satisfaction survey, 70% of the participants felt can promote their health awareness, and 87% of the participants felt can changed the life style become healthier. Overall, 83% of the participants felt very satisfied to "the twenty-four solar terms healthy workshops".

Conclusions

We found the diversified community nutrition education model do have its effect on promoting community health awareness and changing their life style to healthier way. In the meanwhile, we can observe that positive influence of healthy life style is associated between peer-relationship.

Contact: WEN ShangYu

180755@cch.org.tw

The Effect of Plant-based Diet in Glycemic Control—a Case Report

WENG Pei-Hsuan, JIN Bi-Xia, TSENG Chi, CHUO Ying-Hsiang

Introduction

Low-carbohydrate diet is popular for diabetic control but may associate with high animal protein and fat. Plant-based diet, composed of higher carbohydrate and dietary fibers, is also effective in glycemic control and weight reduction. We present a case whose blood sugar dramatically improved by plant-based diet.

Purpose/Methods

The NEWSTART lifestyle program by Taiwan Adventist Hospital is a 13-day residential program serving only vegan diet. We had a 62 year-old male patient with type II diabetes, hypertension, and coronary artery disease post stent insertion. His blood sugar was previously controlled by insulin 82U per day. His BMI was 33 kg/m² and HbA1C was 8%. The program began with 24-hour vegetable juice fasting to restore insulin sensitivity. Afterwards, we gave him a 2000-calorie diet containing 60% carbohydrate

(mainly whole-grains), 15% plant protein, and 25% fat (mainly nuts). He had 30-minutes of brisk walking 3 times per day. A metabolic blood panel was performed before and after the course. Finger stick blood sugar before and after meals and before bedtime was checked every day.

Results

The patient's insulin was all discontinued during the 13-day course but he still had good sugar control by changing his diet (preprandial and postprandial glucose 80-130 and below 180mg/dL, respectively). He learned how to estimate food portions and choose low glycemic-index carbohydrate. At the end of the course, his weight reduced from 100.8 to 94.4kg, and triglyceride decreased from 125 to 85mg/dL. His hypertensive medications were reduced by half. After the course he kept the same dietary principle by himself. After 3 months, his weight decrease to 88kg, and HbA1C was 7% under insulin 15-30U per day. After 6 months, he did not gain weight and only need insulin 15U per day to achieve HbA1C at 6.5%.

Conclusions

The NEWSTART program and plant-based diet have sustainable effect on sugar and weight control in obese patients with type II diabetes

Contact: WENG Pei-Hsuan

Taiwan Adventist Hospital

10556 Taipei City, ventlweng@gmail.com

To Provide Services Regarding Nutrition to Promote Health of the general publics

CHANG Huang-Yu, LIN Ching-Feng, LUO Jiing-Chyuan, LI Ling-May

Introduction

Dietitians integrated hospital resources to develop a health promotion program following the hospital's objectives. To enhance health of the general public, information was collected throughout the program. E-media was also adopted to promote medical nutrition knowledge to a wider community.

Purpose/Methods

1. Employees: 1.1 Developing Personal Skills: Dietitians and chefs created simple dishes targeting specific diseases. 1.2 Creating a Supportive Environment: Employee cafeteria offered therapeutic diet and information regarding MNT. 2. Patients: 2.1 Diet education: Dietitians educated patients to enhance their understanding of therapeutic diet. 2.2 Nursing home: Dietitians and chefs made dishes with the residents. 3. The general public: 3.1 Services were provided for elderly people living alone, students et al. 3.2 Patients association: Nutrition education was organized targeting diabetic patients, dialysis patients et al.

Results

The program was conducted from January to December 2019. A total of 2331 people benefited from the program with 91% of satisfaction rate.

Conclusions

Medical resources and specific needs were integrated for the team of dietitians to promote a healthier lifestyle. Three groups were targeted through health education, therapeutic diet and cooking classes with a high satisfaction rate.

Contact: LIN Ching-feng

Keelung Hospital Ministry of Health and Welfare

201 Keelung, chingfeng01@gmail.com

Using Picture Education Tools to Enhance Diabetes Cognition of people

TSAI Yi-Ting, CHANG Fu-Sheng

Introduction

The World Health Organization released the first Global Report on Diabetes on World Health Day 2016. The report states that the global prevalence of diabetes among people over 18 years of age increased from 4.7% in 1980 to 8.5% in 2014. Diabetes is the main cause of coronary heart disease, kidney failure, amputation, blindness, and stroke. It not only poses a serious threat to health, it is even life-threatening.

Purpose/Methods

The nutritionist made pictures of the six types of healthy food and national snacks, and printed common myths and questions on the picture card. Through the game similar to "Monopoly Game", the people were given opportunity cards and destiny card, and the people answer first, then the nutritionist explain the correct answer, this way both entertaining and educational help people easily resolve the sugar trap.

Results

Traditional lecture-style teaching is a one-way learning method, which often makes people feel bored. By incorporating nutrition concepts into the teaching curriculum by means of games, this interactive teaching method not only enhances the people's willingness and concentration to learn by 50%, but also enhances the people's impression through pictures.

Conclusions

According to a survey by the Taiwan Health Promotion Administration, Ministry of Health and Welfare's, it is estimated that there are 2.27 million diabetic patients in the country, and the number is increasing rate of 25,000 per year. Diet, medicine, and exercise are the three major factors that determine whether blood sugar is stable. Among them, diet is the most difficult and most important key. The nutritionist uses the game concept of "teaching according to his aptitude" to make the dietary health education different from the traditional class mode by using a highly interesting game interactive method.

Comments

Dietitians help diabetic patients to change their dietary behaviors and improve overall health and blood sugar self-management.

Contact: CHIA WEN Lai

Show Chwan Memorial Hospital

CHANGHUA, chd7203270@hotmail.com

Poster Session 12: Supporting patient behavior change and healthy lifestyles: Physical activity

Use Aquatic Therapy to improve physical and mental health in children with developmental delay

TSAI Pei-Chen, LIN Ching-Yu, KU Hui-Hsuan

Introduction

Aquatic therapy could improve the physical fitness in children, and had some psychological benefits were reported in patients with pain, stress or body awareness. Children with developmental delay (DD), especially with mixed physical and mental problems, are not able to do the therapeutic exercise on land, but can have more activities and training in the water. Therefore, we investigated the aquatic therapy outcomes of physical and mental health in children with DD.

Purpose/Methods

Ten cases with combined physical and mental delay were recruited in this study. They had the aquatic therapy at least 1 session a week in 6 months in the foundation, and continued with their regular early intervention program in the hospital. Physical activity and mental status were evaluated before and after the intervention. The muscle strengthening, joint mobility and task oriented exercise in the water were designed in the therapeutic program. All the therapeutic program were performed by trained physical therapists, and all the family were welcome to join and discuss during the session.

Results

The cases with movement delay and 3 cases with autism diagnosis were participated. The cases without autism improved in land activities such as balance, walking, jumping or running. The results showed that effect of aquatic therapy could transit to land activity in children with movement delay. 3 cases with improvement in sensory integration, coordination and behavior were observed after intervention. All cases with autism improved in water activity such as head control, float, posture transition and walking in the water. One case was improved in sitting balance and movement coordination on land. According to the interviews with the care giver, all the cases showed extra benefit in physical activities and had some improvement in mental status after the aquatic therapy.

Conclusions

According to our results, children with DD benefited from the aquatic therapy in both physical and mental health and could transit to land performance. The aquatic therapy could also provide a alternative practice in cases with autism.

Contact: LIN Ching-Yu

Dachien General Hospital
360 Miaoli County, plastic35@yahoo.com.tw

The Effects of Video-Assisted Exercise in Subacute and Chronic Hemiparetic Stroke

WU Pi-Keng, WANG Chao-Min, CHEN Hui-Fang, HSIEH Ping-Lun, LIN Ching-Feng, LUO Jiing-Chyuan, LI Ling-May

Introduction

Patients after stroke had sedentary lifestyle and less exercise, so it hard to maintain their health and might increase fall risks. In order to decrease the chance of falling in daily activities, people after stroke need more balance, muscle power, stability, agility and movement coordination then people in normal. To achieve the goals of rehabilitation, we should improve muscle power of lower limbs and walking speed for people after stroke to enhance the ambulation and balance ability.

Purpose/Methods

29 post-stroke patients involved in exercise (men=20, women=9; age=56.9±12.3 year-old, stroke period=47.37±44.4 months). The exercise class goes one hour, twice a week for 12 weeks. The exercise includes warm-up, main exercise and cool-down. In exercise, we used group circuit training therapy to control the movement speed and repetition in exercise. The exercise program had coordination movements, strengthening and functional exercises. We measured 5-m walking speed, time up and go (TUG), before and after intervention and questionnaire for satisfaction after exercise.

Results

In TUG, the reaction time is faster after intervention and has statistical significance ($-2.68 \pm 4.85s$, $p < .05$). In 5-m walking speed, walking speed is faster after intervention and has statistical significance ($-2.79 \pm 5.89s$, $p < .05$). After Pearson correlation, we found correlation between TUG and 5-m walking speed after intervention ($r = .977$, $p < .001$). That showed people who had faster walking speed had more balance ability and coordination in TUG. According to questionnaire for satisfaction, 90% of subjects satisfied in programs setting and physical activity improvement.

Conclusions

12-week video-assisted exercise can increase walking speed and balance ability and coordination in chronic stroke. The group exercise not only increases the repetition for training program but also can increase the willingness of stroke patients for exercise. People after stroke may do exercise at moderate intensity at least 2 days a week for maintain functions of lower limbs and balance ability and walking ability.

Contact: LIN Ching-feng

Keelung Hospital Ministry of Health and Welfare
201 Keelung, chingfeng01@gmail.com

An Investigation of Bone Mineral Density and Physical Activity of Taxi Drivers in Hualien County, the Eastern Taiwan

CHEN Chien-Ju, LIN Yea-Pyng, CHEN Wan-Hsin

Introduction

The purpose for this investigation is to understand the bone mineral density and physical activity status of taxi drivers in Hualien county, Eastern Taiwan. Taxi drivers drive car with sitting position in long duration, and lack of exercise, may hazardous to their health and increase the risk of some chronic diseases. Bone mineral density (BMD) is considered as an effective predictor of the risk of osteoporotic fracture.

Purpose/Methods

This study design was a cross-sectional survey of taxi drivers. Convenience sampling and structured questionnaire were used for the study and 116 valid questionnaires were collected from December 2018 to January 2019. Their BMD were evaluated by quantitative ultrasound, and physical activity status were evaluated by the "International Physical Activity Questionnaire", IPAQ.

Results

Among the study samples, mean age was 53.52 ± 8.74 years, mean daily working hours were 7.11 ± 2.91 hours, 59.5% were cigarette smokers, 44 % of the samples engaged in any type of regular exercise. The result showed that taxi drivers population age under 49 in the physical activity levels were significantly higher than age upper 50, Taxi drivers with smoking habits had lower bone mineral density than the drivers never smoked. Vigorous physical activity was significantly correlated with bone mineral density.

Conclusions

Taxi drivers lack of physical activities and smoking prevalence was high. It is recommended them to do more vigorous physical activity for better bone mineral density.

Contact: CHEN Cheryl
Mennonite Christian Hospital
Hualien, cherylchen2008@gmail.com

Exploration of Application of Lower Limb Muscular Strength Exercises in Interventional Study of Chronic Patients in the Psychiatric Department

LUO-LAI Wen Yu

Introduction

Lower limb muscular strength exercises were performed with elastic ropes to strengthen the lower limb muscular endurance of chronic mental patients.

Purpose/Methods

Lower limb muscular strength was assessed by a pre-test and lower limb muscular strength exercises were designed. Elastic ropes (strength: 25–80 pounds) were used by encircling the thighs, calves, and ankles to perform exercises for 15 minutes, 3 times a week. After a month, executive ability and outcomes were assessed and the exercises were increased to five times a week. The 15-minute exercise time was maintained. Lower limb muscular strength was measured after three months.

Results

Before improvement in this study, the average scores of the left and right lower limbs were 3.5 and 4 points, respectively; after improvement, the average scores were 4.5 and 5 points, respectively, a 5% improvement. The target achievement rate of improving lower limb muscular strength was 11%. Hence, the improvement rate of lower limb muscular strength was 56%, and the improvement is ongoing.

Conclusions

The purpose is to perform lower limb muscle exercises with elastic ropes in order to strengthen the muscular endurance of the lower limbs. The added value is that it can improve the quality of medical care and reduce the risk of falling. It can also increase interpersonal interactions and group cooperation through the activities.

Comments

Taking advantage of the charm of peers and activities to attract patients to become interested in muscular strength activities is more rewarding than performing the exercises alone. Lower limb muscular strength training requires persistence for the effect to be felt. The patients' falling frequency was reduced and muscular strength was enhanced. These substantive rewards were the best results.

Contact: LUO LAI Wen-Yu

Bali Psychiatric Center, Ministry of Health and Welfare
249 New Taipei City, 7346@balipc.gov.tw

„Cardiopulmonary rehabilitation exercise combined care“ enhances the effectiveness of Cardiopulmonary rehabilitation exercise for the Patients with lung cancer surgery post-operative care

CHENG Cheng Chang, SU Jingyi, HUANG Qiaoying, LIN Tsunen, LIN Chia-Chen

Introduction

Lung cancer is the most common cancer. surgical resection is still the most effective treatment for lung cancer. However, postoperative wound pain often causes patients to dare not cough and take deep breaths, which leads to postoperative pulmonary complications. The factors of surgery and pain are low in daily life activities, and Affects cardiopulmonary tolerance. Therefore, the purpose of this study is to explore the changes in cardiopulmonary function and mobility during lung cancer patients undergoing surgery through integrated care.

Purpose/Methods

Cardiopulmonary rehabilitation exercise combined care plan was implemented. The following strategies were used: (1) occupational therapist teaches daily life activity precautions before and after surgery (2) physical therapist teach cardiopulmonary function and endurance exercise training (3) respiratory therapist uses non-invasive Pressure breathing apparatus care and lung expansion training (4) nurse practitioner integrate the implementation and exchange of opinions among colleagues in various categories.

Results

Thirty patients undergoing lung cancer surgery received postoperative cardiopulmonary rehabilitation exercise combined care. The results showed that: (1) Forced vital capacity before operation and discharge from hospital improved from an average of 50.74% to 63.19%; the six-minute walking test improved from an average of 308.19 meters to 417.53 meters. (2) The Barthel Index gives 100 points to each patient before discharge (3) The average length of hospital stay decreased from 6.5 to 5.1 days.

Conclusions

Post-operative cardiopulmonary rehabilitation exercise combined care can significantly improve the clinical outcomes of lung cancer surgery patients in our hospital, increase the quality of care, and shorten the length of hospitalization.

Contact: CHENG CHANG CHENG

Kaohsiung Medical University Hospital
807 Kaohsiung, jjj1970@ms32.hinet.net

The Effect of Group Course of Muscle Strengthening and Balance Training for Sub-healthy Elderly - A Study of a Community Long- term Care Station

TSAI Hui-Chu, HONG Jia-Ling

Introduction

How to make the elderly successful in healthy aging, prevent and delay disability are important goals. Falls are the second leading cause of death in elderly accidents. The most important factor is the decline of muscle strength and balance function. The purpose of this study is to explore the effectiveness of group training courses on muscle strength and balance for sub-healthy elders in improving their grip strength, muscle strength of lower extremity and walking speed.

Purpose/Methods

A total of 19 elders who volunteered to participate in this study (3 males and 16 females) were trained by professionals. The course lasted for 2 hours, once a week, for 12 weeks, including upper and lower extremity strengthening with thera-band, core muscle training on the mat, balance training in a standing position and muscle stretching. In the first and twelfth weeks of the training course, the grip strength, five times sit-to-stand, and 10-meter walking speed were measured.

Results

The average age of this study was 71.3±5.5 years old, the results showed that grip strength increased by 1.3 kgw (pre-test:

26.4±6.9 kgw ; post-test: 27.7±7.6 kgw, $p<0.05$), five times sit-to-stand decreased by 1.3 seconds (pre-test: 9.2±2.3 s ; post-test: 7.9±1.6 s, $p<0.01$), and 10-m walk test decreased by 0.6 seconds (pre-test: 6.7±0.9 s ; post-test: 6.1±0.8s, $p<0.01$). The Participants improved significantly from pre-test to post-test by group course of muscle strengthening and balance training.

Conclusions

The sub-healthy elderly in the community, under the guidance of professionals, through a group training course that lasts for 12 weeks for two hours each time, not only increases the grip strength, but also reduces the time of five times sit-to-stand, and the walking speed also increases, showing activity more flexible, confirming that regular exercise training can effectively improve muscle strength and balance function.

Contact:

huhctsa@gmail.com

Preliminary Study on the Effect of Community-Based Physical Fitness Intervention

CHEN Sheng-Pyng, KANG Hsiao-Yen, TSAI Wen-Ling, HSIEH Wen-Tsui, TSENG Chiao-Chun, WU Siou-Fang, LIOU Huoy-In, LEE Chin-Ying, CHEN Shu-Yi, YOU Ting-Chi

Introduction

The study is aimed to investigate whether the desired result was achieved after physical fitness program intervention for the elderly in the community, which can act as a reference to the development of community health promotion programs.

Purpose/Methods

A total of 359 elderly residents attending the physical fitness program in the community from 2017 to 2019 were enrolled in this study. The participants came from seven villages. Each class was 60 minutes in duration and once per week for three consecutive months. A structured pre- and post-test was carried out (including body mass index, percentage of fat mass, static balance, agility, upper and lower body strength, upper extremity flexibility and cardiorespiratory endurance, etc.) for analysis. After removing the participants with incomplete data, results from 238 participants were put to descriptive and inferential statistical analysis.

Results

There were 207 females and 31 males, with an average age of 63.6 years in this study. After physical fitness intervention, significant improvement was found in static balance, agility and cardiovascular endurance, as well as part of upper and lower body strength and flexibility (30-second chair-stand test, seated forward bend chair stretch, grip and back scratch tests, etc.).

Conclusions

Here we demonstrate community-based physical fitness program effectively improved the muscular endurance and cardiovascular function in residents. However, our result is limited by the high withdrawal rate, which might bias the results. In future studies, more emphasis should be place on the

improvement of participation rate, especially males, collection of data from more variables, and the reduction of dropout rate, to minimize the errors of conclusions.

Contact: LIOU Huoy-in
Taiwan Landseed Hospital
Tao-yuan, hil7667@gmail.com

„Slim Summer, Good Rhythm and Healthy“ Promote employees to exercise autonomously

TSAI Chiung-Yao, LIU Ming-Jou, LIAO Ling-Ling, LIOU Wen-Chin

Introduction

In a healthy lifestyle, regular exercise is an important part. In particular, when the workplace is under pressure, regular exercise habits should be cultivated. Since 2020, the COVID-19 pandemic has ravaged the world, and group exercise is not a good choice. "Slim Summer, Good Rhythm and Healthy" employee voluntary exercise reward program encourages the development of self-regular exercise to help strengthen immunity.

Purpose/Methods

The activity lasts for 6 months. Participants can draw up an exercise plan according to their exercise habits or preferences, and integrate it into their daily life, such as walking in the park, climbing stairs, etc. they can also record their exercise methods and time and upload data to Google form. During the activity, they can set up an on-line group using line app, in addition to uploading exercise photos, Participants encouraged each other to continue to develop exercise habits.

Results

This activity is divided into two seasons. In the first season, there are 30 participants. This season is evaluated by the exercise time, and the exercise time is mostly 30-59 minutes; In the second quarter, 27 people participated. Experts suggested that weight and grip strength should be added to evaluate the effect. The effect was that the total exercise time was 46550 minutes, 13 people lost a total of 27.9 kg, and the grip strength of 12 people improved.

Conclusions

The content of the first season's activity is not well-designed. After 2 months of implementation, experts in the sports field will be hired to revise the original exercise time and exercise method statistics, and add nutrition, exercise, scientific and technological fitness testing and traditional Chinese medicine health care according to expert suggestions. The course not only allows participants to develop regular exercise habits, they can also choose their own exercise methods and health care methods.

Contact: TSAI CHIUNG YAO
St. Joseph Hospital, Kaohsiung, Taiwan
Kaohsiung City, minana2291@gmail.com

Health Impact of Zumba Fitness on Adult

LEE Ji Hong, ISHII Momoko, BHANDARI Ashish, BOMALIYAMU Aimaiti, JHANG Chae Yoon

Introduction

While physical activities are widely known to have health benefits, some people struggle to establish habits of regular exercises. Improving perception of pain during work out sessions can help participants to continue exercising as well as positively impact their psychological wellbeing. Zumba fitness (ZF) is a popular fitness program that employs "Latin-inspired" music in its aerobic dance choreography, generally conducted in group exercise settings.

Purpose/Methods

This systematic review and meta-analysis aim to investigate effects of Zumba fitness trainings on seemingly healthy adults. Literature review was conducted using databases (PubMed) on randomized controlled trials that assess health impacts of ZF. Study participants across literature were then pooled to compare multiple health parameters provided by individual studies: cardiovascular metrics, muscular parameters, acute effects (e.g., injuries), and pain scores. Bivariate t-tests, Pearson's correlation, and multivariable logistic regression will be conducted to determine if ZF interventions impacts these parameters. Mann-Whitney tests will ascertain differences in comparison groups due to factors including age, gender, duration and frequency of exercises. Meta-analysis will assess heterogeneity and random and fixed effects.

Results

Based on a published systematic review by Vendramin et al. (2016), a total of 586 participants were pooled from 11 studies (age 18-65), and showed improvement of cardiovascular parameters and pain perception when comparing ZF intervention group and nonZF group, or pre- and post-ZF intervention. Improvement in range of movements among ZF+soccer group compared to soccer-only group was also reported (Barene et al. 2016). ZF was also correlated with reduced pain intensity in the neck-shoulder region compared to soccer-only group (Barene et al. 2014a and 2014b). We hypothesize similar results with additional literature reviews.

Conclusions

ZF is an effective physical exercise program to improve various health parameters, such as cardiovascular and muscular parameters, and to reduce pain scores.

Contact: KIM KUE SOOK
Seoul Metropolitan Dong_Bu Hosp Health Promotion Center/ KIHIP
mdkimks00@gmail.com

Effect of Rehabilitation on Disabled Elderly Patients Immediately After Being Discharged From Hospital

PAI Tzu-Chen, CHEN Wen-Chieh, XIAO Yu-Wen, WU Shu-Huei, LEE Hsien-Ju, WEI Shu-Yi, HUANG Ming-Jen, YEN Chia-Chi

Introduction

In 2021, the elderly population in Taiwan reached 16.21%, and it's already an elderly society. The estimated number of the disabled people reached 12.69%. As the elderly and the disabled populations grow rapidly, so do the need and burden of long-term care. As a support to the long-term care of Taiwan's government, Kaohsiung Municipal Min-Sheng Hospital launches Diversified Home Care Services for rehabilitation for improving functional living ability of the disabled elderly and delay their disability.

Purpose/Methods

Rehabilitation is one of the long-term care policies by Taiwan government. The nursing members of KMMSH responsible for the disabled elderly and using the Care Management Assessment Scale to provide individual training target and content based on the patients' conditions after discussion with physicians, therapists and cases' families before they discharged. They centered on individual cases of requiring long-term care, the rehabilitative activities are conducted by professionals to maintain the patients' living engagements and optimize their existing abilities.

Results

Among 104 disabled patients, who participated in rehabilitative activities, 68 patients accepted repeated evaluations after 3 months, including 24 patients (35.3%) who improved to level2, 27 patients (40%) who improved to level3, and 2 patients (2.9%) who improved to level4. There are 78.2% of cases have got their disability improved by 2 levels and above through 3-month interventions. The result indicates the rehabilitative activities can enhance existing ability of cases, prevent their possibility of disability, and delay their disability.

Conclusions

As the research result, these research cases were provided the rehabilitation and care program at home before they discharged by the discharging preparation and service team of KMMSH. Through early professional intervention, the cases can make good use of their potential and improve their self-help ability.

Contact: PAI TZUCHEN

Kaohsiung Municipal Min-Sheng Hospital
Kaohsiung, pai3586@gmail.com

Long-term regular exercise for community-dwelling people adults: impact on BMI, physical fitness and lifestyle

HUNG Li-Ju, PAN Hsiang-Ju, CHEN Ru-Yih, CHEN Jiann-Lin, CHENG Jin-Shiung

Introduction

Regular exercise can reduce a large number of health risks and promote health. But people often use various reasons such as lack of time and too tired work as excuses to do it. This study presents how to promote people's health through regular exercise in the community for up to ten years. In addition to helping participants develop regular exercise habits, making exercise a part of life, the exercise program has promoted people to maintain a healthy BMI and better quality life.

Purpose/Methods

Since 2009, 40-50 participants have been offered free aerobics classes twice a week for 1 hour each time. We used the methods of professional coaches, body-composition measurement, physical fitness tests, questionnaires to strengthen the exercise motivation. The program has cultivated people's sports habits through regular gatherings, full-time rewards, and online social networks. Those methods encourage participants to encourage each other and enable individual exercise habits to continue uninterrupted.

Results

After participating in this community activity, people became good friends and their healthy social activities were promoted. About 80% of participants engaged in exercise for more than 10 months each year. According to our measurements, most participants maintained a healthy BMI (24.3). Besides, a physical fitness test has indicated the participants' waist-to-hip ratio being reduced from 1 to 0.83.

Conclusions

This study shows that regular exercise for people can be achieved through community activity. People participating in the exercise program can enhance their quality of life with healthy social activities, and improve their natural course of adult weight gain with age.

Contact: HUNG LIJU

Kaohsiung Veterans General Hospital
81365 Kaohsiung, ljhorng@vghks.gov.tw

Poster Session 13: Tobacco prevention and cessation

An exploratory of factors associated with surgical smoke protection behavior in the operating room nurses

YU Ching-Lan, LIN Li-Hung, HSIEH Suh-Ing, CHI Shu-Fen, WANG Chi

Introduction

Surgical procedures produced smoke has been thought to be dangerous to operating room nurses ; however, the operating room nurses often did not take personal protective behavior to prevent surgical smoke. Therefore, this study was to explore the factors associated with self-protection behavior for surgical smoke among operating room nurses.

Purpose/Methods

This was a cross-sectional survey using a convenience sample from operating room nurses at a medical center in northern Taiwan. The instruments include personnel characteristics, knowledge and attitude of surgical smoke, and barriers of executing self-protective behavior. The data was analyzed by descriptive and linear regression.

Results

The results showed fracture reconstruction surgery using the wall evacuation systems, other surgery using portable evacuation systems, and attitude toward surgical smoke were significant factors in bivariate linear regression. However, after controlling for covariates, attended in-service education of surgical smoke ($b=-0.78$, $p=0.035$), attitude toward surgical smoke ($b=0.15$, $p<0.001$), and barriers of executing self-protective behavior ($b=-0.10$, $p=0.025$) were significant factors in multivariate linear regression. The overall model was significant and can explain 44.0% of variances (Adjusted $R^2=.194$).

Conclusions

Attended in-service education of surgical smoke, attitude toward surgical smoke, and barriers of executing self-protective behavior were significant factors. It is important to promote operating room nurses' health through providing correct surgical smoke knowledge and self-protection strategies for raising attitude toward surgical smoke, strengthening hospital's environmental engineering improvements, adding evacuation equipment, and developing standard procedures.

Comments

Surgical smoke is slowly affecting the surgical team members. We need to wake up consciousness of the surgical team and implement the use of personal protective equipment, and execute surgical smoke evacuation standards for maintaining one's own health and ensuring a safe working environment.

Contact: HSIEH Suh-Ing
ishsieh@mail.cgust.edu.tw

Quitting smoking starts with the „heart“

CHEN Li Yueh, LIN Sin Yi, TU Po Huai, LEE Shu-Chen, CHIANG Hui Chung, LAY Huey-Jen

Introduction

16% of the annual deaths are associated with smoking-related diseases such as acute myocardial infarction, lung cancer, oral cancer, and so on. Smoking cessation intervene for high-risk smokers with smoking-related disease during hospitalization by aggressively smoking-cessation program. To improve their self-efficacy might increase the success rate of cessation.

Purpose/Methods

Organized an interprofessional promotion team and implement five health promotion strategies based on the Ottawa Charter for Health Promotion: (1) Developing hospital admission with referral service. (2) Posting non-smoking posters, marquee announcements, hanging signs of hospital smoke-free policy, setting smoking alarms at smoking hotspots, and strengthen the patrol frequency in hospital. (3) Sharing experiences from successful cases and multimedia broadcasting. (4) Enhancing smoking cessation through educational videos, and implement of share decision-making charts. (5) Connecting wards with referral service.

Results

From April 2013 to June 2018, a total of 81 hospitalized high-risk smoking cases were enrolled. 60 cases were willing to quit smoking and 21 were not. After discharge, the smoking status was followed. The success rate of smoking cessation in the willing ones at the 3rd month was 55.7%. There were 4 people referred to the smoking-cessation clinic for medications and 3 of them succeed quitting smoking (75% success rate at the 3rd month).

Conclusions

It was found that whether the case was willing to quit smoking or not, providing smoking cessation education and counseling may assist patients keep away from smoking. Those high-risk smoking patients who were willing to quit smoking during the first 3 months should encourage them by motivating their willingness and social support from family and friends. For those un-willing were unable to be motivated in a short period, should keep trying with team-works.

Contact: SHEN HsuPing
 Feng Yuan Hospital of the Ministry of Health and Welfare
 42055 Taichung City , hph@fyh.mohw.gov.tw

The impact of varenicline Treatment in withdrawal symptoms between failed to smoking cessation: a Nationwide Population-Based Cohort Study

LIN Yu-Hsien, TSENG Yuan-Tsung

Introduction

The withdrawal symptoms during smoking cessation treatment are important, but often ignored, aspects of nicotine addiction references and varenicline treatment. This study tried to investigate the association between smoking cessation interventions, cardiovascular disease, or psychosis and examine varenicline treatment, their associated risks in improving smoking reduction.

Purpose/Methods

Of the 4655 adults with varenicline Treatment at least six months, 797 were non-treatment smokers of cessation were failed quite smoke. Risk ratio analysis was used to compare the risks of cardiovascular diseases and adverse events between them. Age-sex-index date-adjusted risk ratios and 95% confidence intervals (CI) for centrally adjudicated incident of events during 11 years of follow-up were estimated using logistic regression models.

Results

Within person analyses showed that varenicline was not associated with significant risks of cardiovascular disease or psychoses. Ischemic heart disease [RR]: 0.53(0.37-0.76), Arterial disease: 1.47(0.23-9.44), Arrhythmia: 0.56(0.34-0.93), sleep disorder: 0.68(0.45-1.05), Alcoholism: 1.01(0.28-3.65), Major depression: 0.82(0.4-1.69), Depression: 0.65(0.42-1.02).

Conclusions

Therefore, varenicline wasn't associated with an increase in the risk of mental conditions between the smoking people without treatment. Using varenicline is assisted with a decreased risk of adverse events, including withdrawal symptoms. withdrawal symptoms, while present when trying to quit smoking, do not appear to display a persistent or significant rise associated with varenicline Treatment intervention reviewed.

Comments

We confirm that this abstract has not been submitted elsewhere and all authors have approved the abstract and agree with submission to HPH.

Contact: TSENG Yuan-Tsung

Tainan Municipal Hospital(Managed By Show Chwan Medical Care Corporation),Taiwan
670 Tainan, b891040733@yahoo.com.tw

The Effectiveness of Using Smart Healthcare in the Smoking Cessation Referral Rate of Elderly Inpatients in a Southern Regional Hospital Was Discussed

CHANG Mei-Yen, WANG Wan-Ting, LIN Chun-Yu, YEN Chia-Chi

Introduction

The elderly population is increasing in Taiwan. With the advancement of science and technology, many things have become more efficient and accurate. Every year, tens of thousands of people die because of smoking, reflecting badly on their families and society. To prevent and control smoking, smart medicine is introduced to smoking inpatients to provide a healthy environment and an opportunity for smoking cessation.

Purpose/Methods

Enrolment began in January 2020 and ended in November 2020. A quasi-experimental, pretest-posttest non-equivalent groups design was applied to 290 smoking inpatients who were willing to be referred (140 in control group and 150 in treatment group) and 35 nurses and smoking cessation instructors (16 in control group and 19 in treatment group). Control groups were tested by paperwork while treatment groups were tested by smart medicine. Two groups were tested on the date of referral, day 1, and day 3, and related analysis was conducted in December.

Results

After smart medicine was used, there was a significant difference in the success rate of referral for smoking cessation among elderly inpatients ($P < 0.05$), with the success rate of experimental groups significantly higher than that of control groups; in addition, nurses and smoking cessation instructors tended to respond positively to the usability and effectiveness of smart medicine.

Conclusions

The study showed that the use of smart medicine increased both the number of referral cases for smoking cessation and the number of people successfully receiving smoking cessation; it also saved nurses and smoking cessation instructors from referring smoking inpatients, allowing them to provide smoking cessation service in a timely manner with a diversity of modern tools.

Contact: HUANG hsin-jou

Kaohsiung Municipal Min-Sheng Hospital
Tainan, hsinjou1224@gmail.com

Joint National Tobacco Control Training for Nurses Caring for High Risk Pregnant Women in Taiwan

LAI Yeur-Hur, CHANG Hao-Yuan, LEE Yun-Hsiang, WU Hsien-Lin, CHEN Yu-Chen, HONG Wei-Wei

Introduction

Smoking is the major threat to maternal and child health (MCH). Thus, smoking cessation and preventing the harm from second hand smoking are important to pregnant and postpartum women. The objective of this program is to train nurses who care for high risk pregnant women (HRPW) to gain the knowledge and skills about tobacco control (TC) and smoking cessation (SC).

Purpose/Methods

This was a joint training program held by 'Taiwan Association of Tobacco Control and Smoking Cessation Education' (TATCSCE) which was sponsored by the jointed efforts from TC and MCH divisions of Health Promotion Administration, Ministry of Health and Welfare in Taiwan. We trained nurses from the National HRPW network, which was composed by hospitals and maternal clinics in Taiwan, to assess and take care of those HRPW, particularly, for whom having smoking or under the exposure of second-hand smoking.

Results

Three half-day training programs were held in three main regions in Taiwan during late 2020. The contents also included preventing relapse, e-cigarette, and health promotion. A total of 71 maternal care nurses from 71 different agents participated in the training. Participants had high satisfaction with the training with scores ranging from 4.51 (0.67) to 4.63 (0.51) (5 = highest satisfaction). T-test showed a significant finding about the confidence of applying SC/TC services to HRPW after the training ($p=0.000$).

Conclusions

This training program showed the success and feasibility of combining TC and MHC training to enhance nurses' abilities in preventing pregnant women's SC in a national level. The more efforts should continue to enhance women's health.

Contact: LAI Yeur-Hur

National Taiwan University
100 Taipei, leuwhwk@yahoo.com.tw

Long-Term Effects Of Nicotine Replacement Therapy On Cardiovascular Risk And Overall Survival Rate In Patients Between Treatment-Naïve: A Cohort Study In Taiwan

TSENG Yuan-Tsung, WANG Chun-Hsiang

Introduction

Many studies evaluating the safety and efficacy of NRT have excluded patients with cardiovascular disease. However, no clinical evidence exists that the use of NRT is detrimental in this setting. This study has included participants with cardiovascular diagnoses and mortality found no increased risk of cardiovascular disease in smokers who used NRT. What is known about the safety of NRT?

Purpose/Methods

Using Taiwan's National Health Insurance Research Database were retrieved from a representative NHIRD cohort from January 2007 to December 2017, we identified 53212 participants with Nicotine replacement and 481 smoking participants without any treatment as the study cohort as the comparison cohort. Risk ratio analysis was used to compare the risks of cardiovascular diseases and mortality between them.

Results

The overall risk was not significantly different in the two cohorts. Myocardial infarction [RR]: 1.00(0.57-1.75), Congestive heart failure 1.03(0.73-1.44), Peripheral vascular disease: 0.68(0.43-1.07), Cerebrovascular disease: 0.78(0.47-1.28), Chronic lung disease: 1.21(0.95-1.56), Myocardial infarction 1.00(0.57-1.75), Congestive heart failure: 1.03(0.73-1.44), Peripheral vascular disease: 0.68(0.43-1.07), Cerebrovascular disease: 0.78(0.47-1.28), Chronic lung disease: 1.21(0.95-1.56), mortality: 0.45(0.3-0.67).

Conclusions

Studies have indicated no increase in cardiovascular events in those who use NRT compared with those who continue to smoke. Participants who continue to smoke between the NRT haven't obvious increased risks of myocardial infarction, cerebrovascular accidents, and other serious vascular events and mortality. Nicotine replacement therapy is an effective pharmacotherapy for smoking cessation. The benefit of NRT to enhance efforts to quit smoking successfully is not clear and convincing. However, NRT is easier if used in the comparison among other cessation approaches.

Contact: TSENG Yuan-Tsung

Tainan Municipal Hospital(Managed By Show Chwan Medical Care Corporation),Taiwan
b891040733@yahoo.com.tw

The decreased risk of Extrahepatic Manifestations by smoking cessation among 560 Smoker with hepatitis B and C: an 11-year follow-up study

TSENG Yuan-Tsung

Introduction

Because smoking was a risk process affecting the relationship of Extrahepatic Manifestations between HBV and HCV infection warrants further attention. However, fewer previous studies have addressed this topic. Assessment of the effect of Extrahepatic Manifestations helps to indicate the importance of smoking cessation hepatitis B and C patients. To estimate the relative risk of extrahepatic manifestations attributes without smoking cessation among smokers.

Purpose/Methods

The program of smoking cessation from National Health Insurance from Taiwan. It claims data were used to construct a cohort of HCV and HBC infected patients diagnosed during the period 2007–2017. Patients are 20 years and elder. We followed 280 patients with smoking cessation and 280 matched controls. The adjusted age and index year were analyzed using a multivariate logistic regression model.

Results

After adjustment, all variables were not significantly different between the two cohorts. The smoking cessation group had a lower prevalence of cardinal and liver-related complications in the logistic odd's analysis to test the risks of study findings. Depression [RR]: 1.81(0.48-6.85), Congestive heart failure : 0.99(0.52-1.87), Peripheral vascular disease : 1.31(0.21-8.14), Palpable_purpura : 0.94(0.55-1.61), Autoimmune_thyroiditis : 0.18(0.15-0.23), Diabetic_nephropathy : 0.18(0.15-0.23), CKD : 0.46(0.27-0.77), Hyperthyroidism : 0.74(0.22-2.5), Thyroiditis : 0.55(0.11-2.79), Cirrhosis : 0.4(0.24-0.66) HCC : 0.4(0.19-0.87).

Conclusions

In conclusion, HCV and HBV-infected patients with smoking cessation are at a lower risk of developing Extrahepatic Manifestations than compared smokers. The apparent advantage of extrahepatic manifestation was in hepatitis within treated smokers. The patients with hepatitis without smoking cessation are at an even higher risk of developing cirrhosis and HCC.

Contact: TSENG Yuan-Tsung

Tainan Municipal Hospital(Managed By Show Chwan Medical Care Corporation),Taiwan
670 Tainan, b891040733@yahoo.com.tw

Long-Term Impact Of Nicotine Replacement Therapy In women Between varenicline: A Cohort Study In Taiwan.

LIN Chiao-Chuan, TSENG Yuan-Tsung

Introduction

The objective of this study was to examine whether the use of nicotine replacement therapy (NRT) increases the risks of diseases in Obstetrics and Gynecology.

Purpose/Methods

Using Taiwan's National Health Insurance Research Database were retrieved from a representative NHIRD cohort from January 2007 to December 2017, we identified 9301 participants with Nicotine replacement and 760 smoking participants with varenicline as the study cohort as the comparison cohort. Risk ratio analysis was used to compare the risks of Obstetrics and Gynecology diseases.

Results

The overall risk was not significantly different in the two cohorts. Abnormal menstruation [RR]: 1.15(0.98-1.34), Dysplastic cells 1.17(0.76-1.78), Ectopic pregnancy 1.06(0.62-1.81), Inpatient uterine atresia 2.04(0.6-6.95), Early delivery in hospital 0.96(0.58-1.61), Total uterine inflammation 0.9(0.76-1.06), Urinary tract infection 0.78(0.65-0.93), abortion 1.12(0.88-1.41).

Conclusions

It seems to determine whether using varenicline therapy was safe when used between Nicotine Replacement Therapy. The conclusions reflect the evidence presented and are likely to be reliable, but should be viewed with caution given the potential for publication bias. This study was to explore medical facility perceptions about the management of smoking in women, and what would enable them to provide better care.

Contact: TSENG Yuan-Tsung

Tainan Municipal Hospital(Managed By Show Chwan Medical Care Corporation),Taiwan
670 Tainan, b891040733@yahoo.com.tw

The effectiveness of case tracking management in smoking clinic

KUO Chia Yi

Introduction

By participating smoke-free service quality improvement plan, people with smoking dependence over 18 years old can get two smoking cessation treatment services each year. By Implement case management tracking system, drug treatment and tracking consultancy services, to enhance smoking cessation rate at three and six month treatment period.

Purpose/Methods

1. Educators chose smoking cessation methods by shared decision-making. Explain drug use, withdrawal syndrome, and give mental support. 2. Using color folders to do visual

management of cases of each physician. 3. Collect telephone interview cases at 3 and 6 months to identify if cessation is success, understand the failure reasons of smoking cessation and encourage further treatments at follow-up clinic. 4. Telephone interview to track cases 3 times a week.

Results

The success rate of smoking cessation in the three months in 2019 increased from 25.88% to 26.52% in 2020, an increase of 2.4%; the success rate of smoking cessation in the six months in 2019 increased from 32.22% to 34.55% in 2020, an increase of 7.2%.

Conclusions

The smoke cessation success rate improves by using case tracking management, health education leaflets, smoking withdrawal syndrome education, mental support and discussion of difficulties and questions in smoking cessation on telephone.

Contact: KUO Chia Yi

Zhongxing Hospital District, Taipei City United Hospital
Taiwan (R.O.C.)
103 Taipei, B0528@tpech.gov.tw

Machine learning models for prediction of smoking cessation success in outpatient clinic patients

LAI Cheng-Chien, HUANG Wei-Hsin, CHANG Betty Chia-Chen, HWANG Lee-Ching

Introduction

Construction of a prediction model capable of providing a success rate for each patient underwent smoking cessation program can provide information to improve patients' health literacy. The aim of this study is to develop prediction models using machine learning algorithms to predict the outcome of smoking cessation.

Purpose/Methods

A total of 4,875 enrollments fulfilled our inclusion criteria. Models with artificial neural network (ANN), support vector machine (SVM), random forest (RF), logistic regression (LoR), k-nearest neighbor (KNN), classification and regression tree (CART), and naïve Bayes (NB) were trained to predict the final smoking status of the patients in a six-month period. Sensitivity, specificity, accuracy, and area under receiver operating characteristic (ROC) curve (AUC or ROC value) were used to determine the performance of the models.

Results

Smoking-cessation rates in the training and test set were 53.7% and 53.4% ($p = 0.9092$), respectively. We adopted the ANN model which reached a slightly better performance, with a sensitivity of 0.704, a specificity of 0.567, an accuracy of 0.640, and an ROC value of 0.660 (95% confidence interval (CI): 0.617–0.702) for prediction in smoking cessation outcome.

Conclusions

Predictive models for smoking cessation were constructed and valuable for predicting smoking cessation success. The results

showed ANN model reached a slightly better performance. The model could aid in providing the predicted smoking cessation success rate for smokers and potential to achieve personalized and precision medicine for treatment of smoking cessation.

Contact: HWANG Lee-Ching

Mackay Memorial Hospital
hlc@mmh.org.tw

Effort to expand smoking prevention lessons for children in elementary school

IMAMURA Shotaro

Introduction

Compared with other cities in Japan, smoking prevalence in adults is still high in Osaka, where our hospital is located. We have been providing smoking prevention classes at local public elementary schools since 2012. The number of classes has recently increased in response to the needs of the community, thereby requiring reassessment of current issues. The objectives of this study were to evolve our smoking prevention program by improving operation efficiency and community involvement.

Purpose/Methods

First, we established an executive office to streamline public relations and implementation processes, as well as reporting of classes. Second, we revised the lesson materials so that staff members without experience could also be involved. Third, we held regular meetings with the ward office and the local medical association and proposed the program as a local project of Nishiyodogawa-ku to secure a budget. Finally, we established a system that mandates new staff members to participate in the program.

Results

The establishment of the executive office facilitated communication between our hospital and schools and systematic operation of the program. We also revised the program to include members of other medical institutions, school nurses and pharmacists, and residents of local community. The lessons have expanded from one school in 2012 to 12 out of the 14 public elementary schools in Nishiyodogawa-ku in 2019. We have also been able to expand the lessons to junior high schools.

Conclusions

Systematic operation of the program from the executive office facilitated the implementation of the program and collaboration with external organizations, which enabled the expansion of the classes to address the needs of the community. Integration of the program into employee training encouraged staff member participation in HPH activities and raised awareness about smoking among staff members.

Contact: IMAMURA Shotaro

Nishiyodo Hospital
555-0024 Osaka,
precious.oneself.d24@gmail.com

Long-Term Impact Of Nicotine Replacement Therapy On Mental And Chronic Pain In Patients Between Treatment-Naïve: A National Cohort Study In Taiwan.

LIN Yu-Hsien, TSENG Yuan-Tsung

Introduction

Chronic pain, one of the most common reasons adults seek smoking, has been linked to activity limitations, dependence on Nicotine, anxiety, depression, and reduced quality of life. Research shows that those with chronic pain are four times more likely to have depression or anxiety than those who are pain-free. This study tries to evaluation mental pain, its association with psychiatric disorders and Self-harm, its assessment, and the implications that research in this field may entail.

Purpose/Methods

Using Taiwan's National Health Insurance Research Database were retrieved from a representative NHIRD cohort from January 2007 to December 2017, we identified 4810 participants with Nicotine replacement and 481 smoking participants without any treatment as the study cohort as the comparison cohort. Risk ratio analysis was used to compare the risks of mental diseases, withdrawal symptoms, and mortality between them.

Results

The overall risk was not significantly different in the two cohorts. Anxiety [RR]: 1.05(0.54-2.03), Major depression 0.7(0.47-1.04), Depression 0.88(0.69-1.12), Alcoholism 1.77(1.23-2.56), Drug addiction 0.31(0.19-0.5), Drug poisoning 1.46(0.2-10.55), Solid liquid poisoning 0.85(0.12-6.12), Suicide and self-injury 1.45(0.46-4.55), Uncertain accident 0.86(0.27-2.68), Menia 0.92(0.71-1.17), lumbago 0.79(0.67-0.93), Back pain 0.92(0.76-1.11), Migraine 1.17(0.83-1.65).

Conclusions

These people with Nicotine Replacement Therapy seem not to report more severe pain, more mental health problems and cognitive impairments, more difficulty taking care of themselves, and higher health care use than those who have chronic pain without these activity restrictions.

Comments

We confirm that this abstract has not been submitted elsewhere and all authors have approved the abstract and agree with submission to HPH.

Contact: TSENG Yuan-Tsung

Tainan Municipal Hospital(Managed By Show Chwan Medical Care Corporation),Taiwan
b891040733@yahoo.com.tw

By participating smoke-free service quality improvement plan, people with smoking duration of more than 18 years can get two smoking cessation treatment services each year. Implement case management tracking mechanism, combine drug treatment and tracking

KUO Chia Yi, CHENG Yung An

Introduction

By participating smoke-free service quality improvement plan, people with smoking duration of more than 18 years can get two smoking cessation treatment services each year. Implement case management tracking mechanism, combine drug treatment and tracking consultancy services, in order to enhance smoking cessation rate at three and six month.

Purpose/Methods

Teachers choose smoking cessation method by shared decision-making. Explain drug use, withdrawal syndrome, and give psychological support. 2. Use color folders to do visual management of cases of each physician. 3. Collect telephone interview cases at 3 and 6 months, to see if quitting is successful; to understand the reasons of failure of smoking cessation, to encourage further treatments at follow-up clinic. 4. Telephone interview to track cases 3 times a week.

Results

The success rate of smoking cessation in the three months of 2019 increased from 25.88% to 26.52% in 2020, an increase of 2.4%; the success rate of smoking cessation in the six months of 2019 increased from 32.22% to 34.55% in 2020, an increase of 7.2%.

Conclusions

Through case tracking management, health education leaflets, education of smoking withdrawal syndrome, psychological support, and discussion of difficulties and questions in smoking cessation by telephone, the success rate of smoking cessation cases improved.

Contact: KUO Chia Yi

Zhongxing Hospital District, Taipei City United Hospital
103 Taipei, B0528@tpech.gov.tw

The impact of Extrahepatic Manifestations in nicotine replacement Treatment in smoking cessation: a Population-Based Cohort Study

HUNG Bin-Cong, TSENG Yuan-Tsung

Introduction

Tobacco use is common among persons living with hepatitis, it is little known about their smoking effect and impact of Extrahepatic Manifestations. Nicotine Replacement Therapy offers a good opportunity to intensively engage this population about other health risks, including smoking.

Purpose/Methods

Using Taiwan's National Health Insurance Research Database were retrieved from a representative NHIRD cohort from January 2007 to December 2017. This study includes 9301 smoking participants of NRT and 764 without treatment in the main analysis. People enrolled in the studies typically follow up in 2007-2017 at the start of the studies. Trials lasted for at least six months. Logistic analysis was used to compare the risks of the Extrahepatic Manifestations condition.

Results

no significantly different hepatitis risk of in the two cohorts. sicca syndrome [RR]: 1.39(0.82-2.34), Lichen planus 0.51(0.07-3.77), Sjogren syndrome 1.39(0.82-2.34), Palpable purpura 0.87(0.69-1.09), Autoimmune thyroiditis 1.43(0.56-3.61), Diabetic nephropathy 1.02(0.13-7.85), Necrolytic acral erythema 3.07(0.86-10.89), Alcoholic liver disease 0.32(0.04-2.34).

Conclusions

The smoking participants who NRT were not significant to achieve Extrahepatic Manifestations when they try to smoking cessation. There is no evidence that NRT is more risks of Extrahepatic Manifestations. In this study, we try to progress in our understanding of Extrahepatic Manifestations in the clinical targets of nicotine and smoking cessation medications that could be used to tailor cessation therapy and increase the success rate.

Contact: TSENG Yuan-Tsung

Tainan Municipal Hospital, Taiwan, b891040733@yahoo.com.tw

The Relationship Between Tobacco Smoking and Pain Perception in Chronic Pain Patients

LEE Ji Hong, BHANDARI Ashish, BOMALIYAMU Aimaiti, KIM Kue Sook, LEE Yu Jeong, GILLIGAN Christopher, ROSS Edgar

Introduction

Ditre et al. (2011) hypothesized the relationship between smoking and pain as a constant feedback loop: nicotine tolerance

leads to reduced pain inhibition and greater perception of pain and/or decreased mood. Smoking might help to decrease in acute pain while increasing long term pain sensitivity simultaneously. Deyo and Bass (1989) reported the associations between chronic pain and smoking by using national survey data; Chronic pain prevalence increased with increasing levels of smoking.

Purpose/Methods

This is a retrospective medical chart review to study the relationship between the Smoking and Pain perception in adult population with chronic pain at the Pain Research Center, Brigham and Women's Hospital, Boston MA. Trial Relief percentage, Post-treatment pain score and complications if any. 226 adult patients were randomly selected, t-test and ANOVA regression model were used to analyze the data.

Results

Out of 226 patients, 88 (39%) of the patients achieved up to 50% pain relief, 49 (22%) achieved 50-70% pain relief, 68 (30%) achieved 70-90% and 21 (9%) achieved 90-100% pain relief. Overall average of pre- and post-treatment pain score was similar in this setting; interestingly, male smoker had slightly higher pain relief than female smoker. The p-value was obtained and both smoker and non-smoker were statistically significant: smoker (0.00000) and non-smoker's (0.00000) p-value were scientifically lower than $p < 0.05$.

Conclusions

Smoking has been associated with chronic pain as many patient use it as a coping mechanism. Smoking might help to decrease the pain initially but it increases the long-term pain sensitivity, having the smokers to feel more pain. Although there was a statistically significant correlation between pain perception and smoking status, it is recommended to expand the research with a larger sample size, even distribution in gender, smoking status and include more pain clinics to have better variability. Based on the sample size and data collected, the results are inconclusive. There is a need of a bigger sample size to have more conclusive results.

Contact: KIM KUE SOOK

Seoul Metropolitan Dong_Bu Hosp Health Promotion Center/ KIHIP

mdkimks00@gmail.com

Exploring the Effectiveness of Applying Cognitive Behavior Therapy to Enhance Self-efficacy of Smoking Cessation

SU Ya-Ling, CHANG Shu-Min, TSAI Yu-Chun, LU Huei-Lan

Introduction

The purpose of this study was to explore of applying cognitive-behavioral therapy groups in psychiatric patients to assist individual in their knowledge of smoking cessation, attitudes, and self-efficacy in order to improve their self-efficacy and increase the success rate of smoking cessation.

Purpose/Methods

The subjects were the psychiatric outpatient who in a psychiatric center from August to September 2019 southern of Taiwan. This homogeneous smoking cessation groups which conducted six sections of smoking cessation group. The group content included the physical and mental impact of cigarettes, applied cognitive behavior therapy through role play learned how to refuse smoking and emotional adjustment, and then use pre- and post-test questionnaires to collect smoking cessation awareness, attitude and self-efficacy, and score two points to understand attitude differences.

Results

9-10 psychiatric outpatients participated this behavioral therapy groups. The statistical comparison between before and after test questionnaires shows that the average smoking cessation awareness increased from 38% to 58%, the average quitting attitude increased from 22% to 42%, and the average self-efficacy from quitting smoking increased to 50%, reached a two-fold increase in self-efficacy, the average daily smoking volume was reduced from 25.4 to 5.3 cigarette, the average CO value decreased from 14.5ppm to 2.4ppm, the satisfaction rate of smoking cessation groups increased from 80% to 95%, and indeed there were 4 successful smoking cessation cases.

Conclusions

The smoking cessation educator applied cognitive behavioral therapy models, and through role-playing learning by smoking cessation groups, individual cases can learn new coping skills to strengthen their cognition and attitude towards smoking cessation, improve self-efficacy of smoking cessation, and effectively increase the success rate of quitting. It is hoped that it can be used as a reference for clinical smoking cessation services.

Contact: LU Huei-Lan

Jianan Psychiatric Center, MOHW
71742 Tainan, 14404@mail.cnpcc.gov.tw

The Effectiveness of Smoking Cessation Services in Psychiatric Center in Southern

CHANG Shu-Min, TSAI Yu-Chun, LU Huei-Lan

Introduction

The purpose of this study was to promote the service quality program of smoke-free hospitals, improving the smoke-free medical environment, increase the motivation of quitting smoking, and applied the case management strategy, smoking cessation health education to increase the three-month and six-month smoking cessation rate.

Purpose/Methods

This study subjects were the smokers in a psychiatric center, according the eight indicators of the GNTH network to provide smoking cessation service, it included kept a smoke-free environmental, community health education, campus lectures, and health literate and sharing decision-making (SDM) quality. Hospital employees received the training of tobacco-free policy and counseling. The smoking status was registered in the

information system. The target of smoking cessation service has been set 250 for inpatient, 2500 outpatients, the three-month point abstinence rate was 33%, six month rate was 30%, and the SDM usage rate is 70%.

Results

The result of this study showed that there were 202 inpatients receiving smoking cessation and education services, with a completion rate of 80.8%. 2653 outpatients received smoking cessation and education services, reaching 100%. The three month achievement rate was 54%, six month achievement rate was 37%, the achievement rate was 100%, the SDM utilization rate of new case was 98%, the achievement rate 100%, the patient smoking status registration rate was 100%, and the employee smoking referral rate was 100%. The awareness rate of smoke-free policies for employees and patients reached 100%.

Conclusions

Share decision-making has been applied to explain the differences between smoking cessation drug choices and unused drugs, smoker could choose their own smoking cessation, the 3-month point abstinence rate were 21% higher than the target, and the 6-month point abstinence rate is 7% higher than the target. This revealed that the promotion of "health literate and SDM", indicating the choice and non-use of smoking cessation drugs. The difference in drug abstinence success and relapse rate 'has promoted the prevention of smoking hazards and has positively assisted quit case health education services.

Contact: LU Huei-Lan

Jianan Psychiatric Center, MOHW
71742 Tainan, 14404@mail.cnpcc.gov.tw

A Preliminary Study of Smokers' Perception and Knowledge of Electronic Cigarettes

TSAI Yu-Chun, HUANG Chih-Ling, CHANG Shu-Min, LU Huei-Lan

Introduction

The purpose of this study is to explore the knowledge of smokers' awareness and knowledge of e-cigarettes, and to provide directions for the implementation of e-cigarette advocacy.

Purpose/Methods

The subject of this study was smokers aged 18-25 years old. The data collection period is from January 1, 2018 to February 2019. The self-filled questionnaire was used to understand the smokers' e-cigarette perception and e-cigarette knowledge. Statistics were performed using SPSS 20.0 software.

Results

A total of 151 cases were collected in this study. The results showed that the age distribution of smokers was 19 to 25 years, with an average of 21.6 years old; the average of education years were 14.7 years; regular smokers accounted for 68%, occasionally smoking was 32%; 54% fathers were smokers; 40% friends were smokers, the average value of e-cigarette detection was 3.98; the average value of e-cigarette knowledge was 3.84.

Conclusions

85% of smokers have heard of e-cigarettes, but they lack knowledge of e-cigarettes, and believe that the use of e-cigarettes can reduce health hazards. Misinformation has caused smokers to have a positive attitude towards e-cigarettes and increase their use. To reduce the use of e-cigarettes by smokers, we must first teach smokers the correct knowledge of e-cigarettes. This statistical data is expected to provide reference applications for related practitioners in the future.

Contact: LU Huei-Lan

Jiannan Psychiatric Center, MOHW
71742 Tainan, 14404@mail.cnpcc.gov.tw

Two-year Follow-up Results of Outpatient Smoking-Cessation Therapy at a Health Promotion Hospital in Chest Hospital

LIAO Lin Yu, HUNG Yun-Ying, CHENG Hsiu-Rong

Introduction

Smoking is cause of respiratory-related attack and induces lung disease deterioration. Quit smoking results can improve lung function, respiratory symptoms and disease prognosis, even decrease airway inflammation. The purpose was to explore two-year follow-up results of outpatient smoking cessation therapy at a health promotion hospital in chest hospital, and analyze the factors that affect smoking cessation success.

Purpose/Methods

A total of 133 participates were enrolled from January 2018 to December 2019. Include criteria: over 18 years, outpatient smoking cessation therapy in the public health insurance, nicotine addiction ≥ 5 points, and daily smoking ≥ 10 cigarettes. The outpatient received drug treatment, cessation education, individual counseling and case management twice course a year, 8 weeks per course for 90 days. The point abstinence rate by phone call was assessed at the 3rd month and the 6th month.

Results

The point abstinence rate, 29.85% at 3rd month in 2019 is higher than 28% in 2018; 24.1% at 6th month in 2019 is lower than 40.54% in 2018. Under project analysis, factors correlated with the point abstinence rate included the low number of return visits (average of less than 2 times), the number of nicotine patch treatment, the main disease tends to stabilize, nicotine dependence and previous experience of tobacco cessation in the 6th month.

Conclusions

Results of this study suggested that the outpatient smoking cessation therapy improved quit rate at 3rd month, but at 6th month was decreased. Base on finding factors of quit rate decreased that should be emphasizes importance of quitting smoking for disease control, increasing the number of return visits, and the to allow patients to participate in medication decision-making (use of SDM tools), especially those with nicotine dependence or disease improvement patients.

Contact: CHAO YANG Fu

Chest Hospital, Ministry of Health and Welfare
Tainan, tn50276@ccd.mohw.gov.tw

The effectiveness of smoking patients acceptance oral mucosal screening. – case study of a District Teaching Hospital

CHEN Mei Chun, HSIAO Miao Ping, LIN Ya Hui, FU Chao Yang, HUANG Shao Tsung, LIAO Lin Yu

Introduction

The oral cancer high risk group provides the oral mucosal screening, which can be detected and treated early, but the rate of follow-up inspection is somewhat low, which makes the mortality of oral cancer continue to rise. This article analysis the effectiveness of oral mucosal screening for outpatients seeking medical treatment as a way to improve public health.

Purpose/Methods

This article recollection retrospective analysis of a District Teaching Hospital in a certain region from 108/01/01 to 108/06/30 with the assistance of medical staff to screen out smoking patients in outpatient clinics, which meets the age of 30 and has not received oral mucosa within 2 years Screening and providing medical education through medical staff to promote patients to accept screening.

Results

The period from 108/01/01 to 108/06/30, 557 outpatients with smoker were admitted to the hospital. Agree the age of 30 and didn't experience oral mucosal screening within 2 years, 511 males (91.7%) and 46 females (8.3%), 108 (19.4%) aged 30-39, 113 (20.3%) aged 40-49, 157 (28.2%) aged 50-59, and 120 (21.5%) aged 60-69, 59 persons (10.6%) aged 70 years or older, 518 (93.0%) were screened without abnormality. 13 of them were further, and 26 were refused follow-up inspection.

Conclusions

Precancerous lesions of oral cancer include leukoplakia, erythroplakia, submucosal fibrosis, verrucous hyperplasia, and chronic ulcers in various parts of the oral mucosal. People with abnormal oral mucosal screening often overlook the importance of oral mucosal follow-up inspection.

Contact: CHAO YANG Fu

Chest Hospital, Ministry of Health and Welfare
Tainan, tn50276@ccd.mohw.gov.tw

Assisting a patient with chronic obstructive pulmonary disease to quit smoking successfully

HONG Wei-Wei, LIANG Wei-Li, CHEN Jung-Yueh

Introduction

Chronic obstructive pulmonary disease (COPD) is a chronic inflammatory disease which cause persistent airway obstruction. There were three million annually death cause by COPD worldwide. COPD was the 7th leading cause of death in Taiwan. Over 90% of patients with COPD are related to tobacco smoking. Besides, 40% COPD patients kept smoking. Therefore, smoking cessation as soon as possible is an important step in reducing the harm caused by tobacco smoking.

Purpose/Methods

Mr. Pan, a 50 year-old COPD patient. Tobacco smoking one and a half packs per day for 20 years was noted. Varenicline was prescribed for smoking cessation. The case manager educated him to reduce the desire of smoking by drinking water, gargling or limb stretching. Keeping regular medications for smoking cessation was also emphasized. Through the 8-week intervention of smoking cessation services, we hoped to improve the individual's ability to maintain self-health and reduce the rate of disease deterioration.

Results

We approached the patient and realized the difficulty of smoking cessation was the culture of smoking cigarettes in the work environment. According to the Smoke Prevention Law, three-person indoor workplaces and non-smoking areas are regulations that must ban smoking. The patient was educated to refuse smoking by colleagues. Chest tightness and shortness of breathing were much improving after smoking cessation. Sharing the experiences that how to quit smoking with the colleagues was also encouraged.

Conclusions

Many patients failed to quit smoking due to lack of self-confidence. First we can enhance the motivation of smoking cessation by personal education and consultation. Medications for smoking cessation are able to strengthen the change of smoking habit. During smoking cessation, we encourage patients to express their concern and affliction. Besides, during consultation, we also help the patients to set up the correct concept. Good family support is also important to maintain the success of smoking cessation.

Contact: HONG wei-wei

E-Da hospital, Kaohsiung,
mm19910315@gmail.com

Effectiveness of Varenicline versus Combination Nicotine Replacement Therapy for Smoking Cessation: One Year Follow Up in Taiwan

HSUEH Kuang-Chieh, TANG Pei-Ling, CHEN Jin-Shuen, CHEN Hong Jhe

Introduction

Varenicline and combination nicotine replacement treatment (cNRT) have been recommended as the most effective pharmacotherapies, with equal abstinence rate for smoking cessation in a network meta-analysis of randomized trials, but data from real-world long-term follow-up studies are rare. This study aimed to compare the 12-month sustained abstinence rates of smokers using varenicline versus cNRT in their quit attempt.

Purpose/Methods

A total of 3,569 smokers were recruited via the Department of Family Medicine outpatient department at Kaohsiung Veteran General Hospital between June 2013 and March 2019. Participants received counseling from a physician and chose either varenicline (N=2,870) or cNRT (N=699) for smoking cessation. Both varenicline and cNRT users could receive a free 8-week supply and 8 clinic visits over 90 days. Participants were followed-up by telephone at 12, 24, and 52 weeks from first visit. The primary outcome measure of the study was self-reported sustained abstinence up to 52 weeks.

Results

Varenicline users had a significantly higher sustained abstinence rate weeks 12-52, adjusted for baseline variables (15.2% vs. 10.3%, $p=0.001$; aOR= 1.47, 95%CI: 1.05–2.05). Other significant predictors of 52 weeks sustained abstinence were being male, having a higher income, attending more clinical visits, and have lower nicotine dependence.

Conclusions

Varenicline appears to have higher sustained abstinence rates to 52 weeks compared with cNRT, in a smoking cessation clinic where smokers can choose their medication option.

Comments

Varenicline may be more effective than cNRT in the real-world smoking cessation therapy, that result may result from Varenicline is relatively easier to use than the cNRT (patch and gum) and Varenicline users may have better compliance than cNRT.

Contact: HSUEH Kuang-Chieh

Kaohsiung Veteran General Hospital, 813 Kaohsiung,
kjhsuch@gmail.com

Poster Session 14: Prevention of NCDs and chronic disease management

Analysis of medical resource consumption in multiple myeloma patients who received autologous hematopoietic stem cell transplantation

YE H Shu Ting

Introduction

Multiple Myeloma (abbreviated as MM) is a hematologic malignancy characterized by abnormal growth of malignant plasma cells in the bone marrow. This disease may progress without obvious clinical manifestation. When the disease gets worse, patients would suffer from anemia, infection, kidney injury or bone destruction.

Purpose/Methods

This is a retrospective study conducted by collection of clinical data in a single medical center. The clinical data (such as age, gender, stage, M protein, socio-economic status...) of MM patients who received autologous hematopoietic stem cell transplantation from 2010 to 2017 (follow to the end of 2018) at Kaohsiung Medical University Hospital was collected. This study was reviewed and approved by the ethics committee.

Results

A total of 140 MM patients was included in the study. Among of these, 26 patients underwent autologous hematopoietic stem cell transplantation. The mean age of this subgroup was 57.77 ± 8.24 years. The mean number of outpatient visits (times, from diagnosis to 2018) was 97.77 ± 64.72 , mean number of hospitalizations (times, from diagnosis to 2018) was 5 ± 3.09 , mean number of emergency department visits (times, from diagnosis to 2018) was 3.04 ± 5.02 , total outpatient cost (from diagnosis to 2018) was $1,318,724.23 \pm 1,009,450.62$ NTD, and total hospitalization cost was $1,020,685.5 \pm 478,821.88$ NTD (from diagnosis to 2018). Highest medical resource consumption was observed in the year of autologous transplantation.

Conclusions

Gonzalez-McQuire (2018) conducted a transnational observation study that included patients with multiple myeloma living in Britain (n=387), France (n=502) and Italy (n=393). This study showed that the cost was the highest during the period of active treatment, and if the patient's condition improved, the cost would decrease accordingly. This result was similar to that of our study, in which the outpatient and hospitalization expenses of the treated patients were the highest in the first year and began to decrease after the second year.

Contact: YE H Shu Ting

Division of Hematology and Oncology, Kaohsiung Medical University Hospital
970178@kmu.org.tw

Intention to take the fecal occult blood test and its influencing factors among diabetics

HSIEH Yi-Lin, LEE Fang-Hsin, TANG Jing-Shia

Introduction

In Taiwan, "health promoting hospitals" have already played an essential role in promoting primary healthcare and health. Diabetics are more likely to develop colorectal cancer, which can be detected early through the fecal occult blood test to initiate prompt treatment. This study aimed to identify factors influencing their intention to take it in the future.

Purpose/Methods

In this cross-sectional study, 250 diabetics were enlisted from those visiting a hospital in southern Taiwan. The tools employed were patient information and health status questionnaires; perceived susceptibility to colorectal cancer scale; perceived seriousness of colorectal cancer scale; perceived benefits of taking colorectal cancer screening scale; perceived barriers of taking colorectal cancer screening scale; colorectal cancer screening knowledge scale; colorectal cancer screening attitude scale; and questionnaire on the intention to take the fecal occult blood test in the future.

Results

It was observed that those scoring every extra point on the colorectal cancer screening knowledge scale are 1.063 times more likely to take the test in the future (95%CI=1.017-1.109, $p=.005$); moreover, each point decrease on the perceived barriers of taking colorectal cancer screening scale are 1.113 times more likely to take the test in the future (95%CI=1.003-1.236, $p=.044$).

Conclusions

Colorectal cancer screening knowledge and perceived barriers of taking colorectal cancer screening were observed to be the factors influencing the intention to take the test.

Contact: LEE Fang-Hsin

College of Nursing, Chung Hwa University of Medical Technology
71703 Tainan, fanny77@seed.net.tw

Effectiveness Analysis of Community Precision Medicine Investment in Cancer Prevention: a Case Study in Central Taiwan

LAI Chia-Wen, LI Yu-Ching

Introduction

The top ten causes of death in Taiwan from 2008 to 2018 were first by malignant tumors (cancers). Colorectal cancer accounted for 24.7% of all cancer population and ranked third among all cancers per 100,000 population. According to statistics data, if early colorectal cancer is properly treated, survival rate is over 90%. The screening policy in Taiwan is based on the experience

of European and American countries. The fecal occult blood screening test performed once every two years can reduce the death rate of colorectal cancer by about 18% to 33%. Because the people in Taiwan partial township usually lack of anti-cancer concepts, cancer prevention is a priority.

Purpose/Methods

Taking the central regional hospital as an example for the prevention and treatment of colorectal cancer in Fenyan Township (Partial Township) of Changhua County, the public's health education was promoted to improve the population's colorectal cancer screening intention. At the same time, screening tools and follow-up visits for positive cases were provided. These methods increased the detection rate of high-risk group for colorectal cancer (positive cases) and reduced the mortality rate of colorectal cancer in Fenyan Township.

Results

The Studies showed that the number of colorectal cancer screenings increased from 96 people in 2018 to 180 people in 2019, an increase by 87.5%. While the number of positive cases increased from 9 people to 44 people, an increase by 388.8% and the rate of completed diagnosis increased by 12.8%. The increasing number of positive cases was 2.6 times more than that one of screening.

Conclusions

The results showed that no colorectal cancer cases was detected within 2 years, but effective health education, screening tools, and positive case management could promote the public's willingness to screen, increase the diagnosis rate and reduce the incidence of cancer. The implementation of precision medicine in hospitals and communities can effectively achieve the prevention and treatment of colorectal cancer.

Comments

This precision medicine will be invested in other rural areas in Taiwan to achieve the purpose of early detection and early treatment in the future.

Contact: CHIA WEN Lai

Show Chwan Memorial Hospital
CHANGHUA, chd7203270@hotmail.com

CBD and Pain Management

LEE Ji Hong, BHANDARI Ashish,
BOMALIYAMU Aimaiti, ISHII Momoko,
CHIODO Laura, JHANG Chae Yoon

Introduction

Chronic pain affects approximately 125 million Americans. Opioid use to control pain has resulted in misuse and abuse causing a national crisis. One possible solution is to implement alternative methods to manage pain (Skolnick 2018). Cannabidiol (CBD), a non-psychoactive cannabinoid from Cannabis sativa L., is used to treat anxiety, epilepsy, and other pathologies (Iffland et al. 2017, Hammell et. al 2016). Although there are few studies on CBD use for human pain, efficacy has been demonstrated in animals (Lowin et. al 2019). This study aims to investigate the synergistic and additive effects of CBD in adults with pain.

Purpose/Methods

The purpose of this systematic review and meta-analysis is to evaluate the additive or synergistic effect of CBD in reducing pain. A literature search was performed using PubMed. Publications other than randomized controlled trials were excluded. Meta-analysis was conducted to assess heterogeneity and random and fixed effects, to compare the standardized mean difference (95% CI) of pain between CBD and control groups.

Results

Johnson et al. (2010) reported on 177 patients with recalcitrant cancer pain. Using the Numerical Rating Scale (NRS) for pain, a 30% decrease in pain compared to placebo was noted. In another study by Serpell et al. (2014), 303 patients with peripheral neuropathy were randomized to a THC/CBD (128) or placebo (118) additive. There was a statistically significant reduction in NRS scores in the THC/CBD spray group. Finally, Ueberall et al. (2019) reported that 488 out of 800 patients with severe chronic pain who received a THC/CBD additive had 50% or greater improvement in at least 5 of 9 aggregated symptom relief (ASR-9) factors. After systematic review, it is hypothesized that patients treated with CBD will have reduced pain compared to controls (p-value <0.05).

Conclusions

The additive effects of cannabidiol reduces pain.

Contact: KIM KUE SOOK

Seoul Metropolitan Dong_Bu Hosp Health Promotion Center/
KIHIP
Seoul 0284 SEOUL, mdkimks00@gmail.com

Analysis of factors related to the decline of a soldier's body mass index.

LIN Jing-Yi, HSU Pei-Jung, FANG Wei-Hui

Introduction

With the advent of the peace era and the general improvement of living standards, obesity has become an important issue affecting the quality of military personnel worldwide. We conducted a correlation between body mass index, demographic variables, physical activity and overwork status for setting weight reduction subjects and the health promotion in a certain army.

Purpose/Methods

Bio-electrical Impedance Analysis (BIA) is a method used to monitor health by looking at Body Mass Index (BMI). This is a cross-sectional study using self-administered International Physical Activity Questionnaire (IPAQ) and Fatigue Severity Scale. Data analyzed by independent t-test, one-way ANOVA.

Results

The 108 recipients (males68; females40) with mean age of 38.80±10.95 years; mean BMI 25.80±4.24, the overweight rate was 23% for BMI≥24 kg/m², and the obesity rate was 41% for BMI≥27 kg/m². There have chronic disease was 11.32% and 14.42% smoking of soldiers. BMI has a significant with gender. (males27.31±3.88; females23.23±3.58; t=5.42, P <0.001). Participants with severe levels of personal overwork have higher

BMI than others ($F(2,103)=3.078$, $p<0.05$) and BMI with low activity is higher than others ($F(2,103)=5.41$, $p<0.005$).

Conclusions

In this investigation, the rate of overweight and obesity is the priority issues. The captain should help the staff to control weight and encourage whom were overweight to increase physical activity during army fitness time. Moreover, the captain could build effective stress management strategies to avoid the stress hazards effect on the health of soldier.

Contact: LIN Jing-Yi

Department of Family Medicine & Community Health, Tri-service General Hospital, b2288336@gmail.com

Effects of Spinal Cord Stimulation on Patients' Opioid Usage

**LEE Ji Hong, BHANDARI Ashish,
BOMALIYAMU Aimaiti, GILLIGAN
Christopher, ROSS Edgar**

Introduction

Chronic pain may limit one's movements, which further reduces flexibility and strength. Treatments for chronic pain include acupuncture, physical therapy, electrical spinal cord stimulation, nerve blocks, and surgery. People with chronic pain also rely on opioid medications; however, even though opioid provides short term relief from pain, but it increases the chance of addiction and may put patients at risk. This retrospective study evaluated the effectiveness of SCS on the reduction of opioid usage among patients who have undergone SCS procedure will be explored. It is hoped that through this finding, people with chronic pain can have better knowledge of the positive impacts SCS has on pain reduction.

Purpose/Methods

100 patients between 21 and 80 years, who underwent SCS procedure within 2016 to 2017 were included. The patient data were collected using an electronic medical record called "EPIC". Few of the variables collected were: medical record number, age, gender, BMI, initial pain score, morphine equivalent dose (MED) before and after SCS, trial relief percentage, complications, and patient satisfaction. The MED was used as an indicator of opioid usage and it was calculated by multiply the number of units of each prescription by the milligrams of opioid per unit and by the morphine equivalent conversion factor. Ineffective SCS therapy was measured by the numbers of explant patients. Chi-square test was used to analyze the effect of SCS on opioid usage by comparing the pre and post SCS MED.

Results

Total of 100 patients (54.54 ± 14.14 years, 50% females) were included. Following SCS therapy, 67 patients (67%) had decrease in opioid usage, whereas 33 patients (33%) had increase in opioid usage. For total population, the average daily MED before SCS was 21.28mg, while the average daily MED after SCS was 14.26. Three patients had SCS explanted. The p-value was less than 0.000.

Conclusions

This retrospective study's results supported the hypothesis that SCS had positive effects in reducing patients' opioid usage. It further validated previous studies' conclusion of patients' opioid usage reduced after the utilization of SCS. Considering SCS prior to increase opioid usage may improve patients' pain condition and overall life satisfaction.

Contact: KIM KUE SOOK

Seoul Metropolitan Dong_Bu Hosp Health Promotion Center/ KIHIP

Seoul 0284 SEOUL, mdkimks00@gmail.com

Positive Predictive Value and Related Risk Factors among Breast Cancer in Central Taiwan

YU Tsai Mei, LEE Li Yun

Introduction

Breast cancer is the most common cancer diagnosed in women and can cause a threat to life as well as affect quality of life. Therefore, early detection and early treatment is highly crucial. The purpose of this study was to investigate the risk factors for breast cancer in middle-aged and elderly women who underwent mammography screening.

Purpose/Methods

The retrospective study conducted a medical record review of middle-aged and elderly women who diagnosis breast cancer after mammography screening at a local community hospital in Changhua County. Between January 1, 2017 and December 31, 2018. The data analyzed were used chi-square test to compare difference of basic demographic, state of health between two groups, one group is diagnosis breast cancer, and another group is without breast cancer. Binary logistic regression was used to analyzed the risk factors of breast cancer.

Results

This study were 1041 participants enrolled. The mean age was 56 years. The breast cancer of Positive Predictive Value was 6.7%. Overall 70 subjects were diagnosed with breast cancer after mammography screening. The family history of breast cancer, unusual lumps, first menstruation of age are significant correlation with the breast cancer in middle-aged and elderly women. Those OR for women with a family history of breast cancer was 0.48 (95% CI 0.24-0.94), one or more unusual lumps OR was 2.42 (95% CI 1.48-3.94), and menstruation age of 11 years OR was 3.2 (95% CI 1.06-9.75).

Conclusions

The family history of breast cancer, unusual lumps, and first menstruation of age are predictors of breast cancer in middle-aged and elderly women. It is important for middle-aged and elderly women to be aware of the risk of breast cancer. Clinical healthcare providers should raising the awareness of the risk factors of breast cancer and encouraging healthy lifestyle habits during daily life, to prevention breast cancer happen and reduce medical expenditure.

Contact: YU TSAI MEI

Changhua Christian Medical Foundation Yuanlin Christian Hospital, 1502171@cch.org.tw

The differential glycemic control response to sustained virologic response in type 2 diabetes with chronic hepatitis C patients: a two-year follow-up study

HUA Shih-Che, LO Ching-Chu, CHEN Mei-Tsu, HUANG Jui-Fang, LIN Chien-Hung, CHENG Hsu-Sheng, LIAO Yi-Tang, HUNG I-Wen

Introduction

Currently, direct-acting antiviral drugs (DAA) are the gold standard treatment for chronic hepatitis C (HCV) infection to achieve sustained virologic response (SVR) in nearly all patients. HCV infection is proved to directly impair glucose metabolism. Among patients with both type 2 diabetes (T2D) and HCV, SVR achieved by DAA therapy may improve glycemic control, but available studies are limited. Our study is aimed to examine the effects of SVR achieved by DAA on long-term glycemic control.

Purpose/Methods

We conducted a retrospective cohort study of T2D patients from St. Martin De Porres Hospital who had a positive HCV RNA test and received first course of DAA between 25 Jun, 2017 and 22 Jan, 2019. SVR was defined as post-DAA therapy HCV RNA non-detectable. Compared to before DAA, the effects of SVR on changes of glycated hemoglobin (HbA1c) after DAA, 1 year', and 2 year' follow-up (FU) was statistically evaluated by Wilcoxon rank sign test (SPSS version 24.0).

Results

Totally 93 T2D & HCV treated by DAA were enrolled and all achieved SVR. The mean age was 68 y/o and male was 54%. SVR was statistically associated with HbA1c improvement after DAA ($P=0.019$), but not 1 year' and 2 year' FU. The baseline poorer sugar control group [$HbA1c > 7\%$ ($N=42$)], SVR was strongly associated with HbA1c reduction after DAA, 1 year', and 2 year' FU ($P < 0.005$). SVR did not significantly improve HbA1c in better glycemic control [$HbA1c \leq 7\%$ ($N=71$)] at any FU.

Conclusions

Our study showed that DAA-based HCV therapy resulting in SVR do improve glycemic control, although the effects not persist after 1 year' and 2 year' follow-up. However, the benefits of glycemic improvement were consistently prominent up to 2 years in initially poorer blood sugar control group before DAA, as compared to baseline better sugar group. It implied DAA therapy is more urgently needed for poor glycemic control T2D and HCV patients to achieve better sugar control.

Contact: HUA SHIH-CHE

St. Martin De Porres Hospital
60002 Chiayi City, tedshua@gmail.com

Analysis of the current status of B-blockers in diabetic patients

WU Chi-Wen, LIN Ching-Feng, LUO Jiing-Chyuan, LI Ling-May

Introduction

The advantage (reducing cardiovascular risk) and disadvantage (masking hypoglycemia and causing severe hypoglycemia) of B-blockers in diabetic patients have been debated in the past. Based on the recent studies, diabetic patients were divided into insulin resistant and non-affected types. This study was designed to analyze the current status of type B blockers in diabetic patients according to this classification.

Purpose/Methods

This study included patients who used both B-blockers and hypoglycemic drugs during January and December in 2017, and it was separated the B-blockers into diabetic friendly (betaxolol, carvedilol, labetalol, DF group) and diabetes unfriendly (metoprolol, atenolol, propranolol, NDF group) conditions. Data analysis was performed in Excel to analyze the use of departments, indications, and the use of blood glucose drugs.

Results

This study included 679 patients, and 436 in DF group. The main departments in the DF and NDF groups were cardiology and endocrinology (77.5% and 74.1%). The Hypoglycemic drug items were NDF group 2.10 ± 0.97 and DF group 2.12 ± 0.98 ($P=0.41$). In the indications, simple hypertension without other related diagnosis were used 35 in NDF group and 108 in DF group. For NDF group other diagnosis, there were 63 people with liver-related diseases, 31 with mental illness symptoms.

Conclusions

It is reasonable to use B-blockers to decreased blood pressure in patients with diabetes and hypertension, but the choice should be based on betaxolol, carvedilol, labetalol, which is resistant or non-affected to blood sugar. However, there are still some indications in the clinic that are based on non-selective beta blockers. Based on the results of this study, about 50% of patients still have improvement.

Contact: LIN Ching-feng

Keelung Hospital Ministry of Health and Welfare
chingfeng01@gmail.com

Application of outdoor game teaching health education to improve the skills of home care with diabetic patients for COVID-19 pandemic management: A Case Study of diabetes support group in Taiwan

CHANG Chia-Chin, HSU Mei-Er, WANG Shu-Mei, LU Hsin-Yin

Introduction

The purpose of this study was to investigate 2019 new coronavirus disease (COVID-19) has brought great impacts to the daily life and health care of the diabetic patients. The life habits of many patients with chronic diseases are even afraid of being infected, so they worries about the COVID-19 and not go to the hospital for continuous treatment diseases and change their medication behavior, reduce outdoor sports and make their chronic diseases poor control.

Purpose/Methods

We use outdoor game teaching health education for management of blood glucose can be achieved by regular exercise, a healthy diet and proper medication to control, self-management practice and psychosocial adjustment. Intensive health education or counselling for patients and their family is highly recommended in order to improve their knowledge.

Results

Results A total of 81 questionnaires were collected for the diabetic patients' satisfaction survey after implementing solutions. The result of our practice increased the health education satisfaction of 80.24%. The program may be an effective strategy to improve the quality and effectiveness of health education.

Conclusions

It is generally recommended to continue the use of chronic medications in diabetic patients who have high blood pressure, lipid, and glucose under professional evaluation and monitoring to maintain a stable drug treatment, and should not stop to avoid affecting the treatment efficacy. Therefore, the outbreak of COVID-19 needs to be effectively prevented, in order to maintain a good lifestyle and maintain good hygiene habits for the patients.

Comments

This study demonstrated that group education can be implemented in a primary care setting and that it can improve glycemic control as well as lifestyle variables in patients with diabetic patients. This supports the notion that an interactive and empowerment strategy can be used as the basis of a group education program delivered by a primary care nurse.

Contact: CHIA-CHING Chang

chung337@gmail.com

Benefits of implementing the "NEWSTART" healthy lifestyle to improve triglyceride and cholesterol in people with high fasting blood glucose levels

LIN Yu-Ching, WANG Chia-Fen, CHUO Ying-Hsiang, HUANG Hui-Ting, CHENG I-Chin

Introduction

Inappropriate life habits of modern people including high pressure work, excess refined food have greatly increased the incidence of chronic illness, such as hyperlipidemia, diabetes and obesity. The risk of being affected by these non-communicable diseases can be reduced by correcting unhealthy lifestyle and therefore people are able to maintain good health condition.

Purpose/Methods

The purpose of this study is to explore the effect of a healthy lifestyle program NEWSTART (Nutrition, Exercise, Water, Sunlight, Temperance, Air, Rest and Trust) on blood biochemical tests of participants with high fasting blood glucose levels. Participants included 15 men and 34 women with average age of 59.3 and fasting blood glucose (FBG) over 100 mg/dl. Blood samples were collected on the second day and the thirteenth day during the program.

Results

Analysis of pre/post measurements shows that FBG were decreased from 125.1 ± 37.32 to 106.8 ± 19.96 mg/dl, serum triglyceride (TG) decreased from 162.9 ± 81.87 to 107.0 ± 46.61 mg/dl, total cholesterol decreased from 194.3 ± 59.12 to 170.16 ± 60.43 mg/dl, and HDL-C decreased from 57.1 ± 15.00 to 55.2 ± 14.31 mg/dl, all with statistical significance ($p < 0.05$). To investigate the factors that may be associated with the change of HDL-C, we found HDL-C will decrease 1 mg/dl for every 10 mg/dl increase in TG after controlling other variables such as age, gender, etc.

Conclusions

It is demonstrated that participants' blood biochemical values were significantly improved after a 13-day healthy lifestyle program. The decrease of HDL-C with the increase in TG may be related to the metabolic mechanism of HDL-C, which needs further study. It is strongly advisable for those who have high fasting blood glucose levels to participate in NEWSTART program, which is also beneficial for all people to practice healthy lifestyle.

Contact:

linc12568@gmail.com

The effect of premixed insulin on glycosylated hemoglobin for the first time

LIN Jui-Ying, LEE Chun-Chuan

Introduction

Purpose Discuss the efficacy in blood sugar control and satisfaction in premixed insulin first-time user who received intervention with multimedia education and blood sugar slider.

Purpose/Methods

Method First, let the patient watch the multimedia education tutorial and then thoroughly explain the purpose of blood sugar slider. Strengthen instructions on the part where the patient were confused of. Reinforce their knowledge regarding diabetes and insulin injection techniques.

Results

Use education evaluation forms: blood sugar slider card/good for you if stabilized sugar. All patients completed to follow up for 3 months and performed sample analysis. Before switching to premixed insulin, HbA1c is $11.03\% \pm 1.82\%$ (mean \pm standard deviation). However, after premixed insulin is used, HbA1c is $8.69\% \pm 1.86\%$ (mean \pm standard deviation) P value <0.001 , significantly difference. Total points are 5 points for two evaluation charts of educational satisfaction. The one (blood sugar slider card) gets 4.81points and the other one (good for you if stabilized sugar) gets 4.71 points.

Conclusions

For patients have poor control blood sugar after basal insulin for 3 months, it is better to use multimedia education which is easy to understand especially for patients who are afraid of multiple insulin injections. Therefore, these findings support this educational material will be helpful in the clinical care of patients with diabetes.

Contact: LIN JUI YING

Division of Endocrinology and Metabolism, Department of Internal Medicine
104 Taipei, e516092003@gmail.com

Poster Session 15: Health promotion responses to the COVID-19 pandemic

Nursing Experience of Caring for a infant With suspected COVID-19 During Isolation

LU Yu Chu, CHEN Heng-Hui

Introduction

The case in this article is a full-term birth with breathlessness and instability after 6 days of birth. It coincides with the early stage of the COVID-19 outbreak. The parents and the case have travel history and contact history, and they are afraid of vertical

infection. The infection control team recommends Take care of the negative pressure isolation ward first. Because the parents of the case were unable to visit in person, they faced considerable pressure and shock in the face of the case's hospitalization and changes in the condition. They were full of anxiety and fear. They were even more worried about the case's future prognosis, which triggered the motivation for discussion.

Purpose/Methods

Use five-level framework assessment, heart failure-related nursing skills and individualized developmental care of newborns, establish a friendly nurse-patient relationship, arrange video visits, proactively provide medical explanations, listen to parents expressing pressure, encourage breastfeeding, and enhance teamwork Parents communicate and maintain the connection between parent and child.

Results

Use heart failure-related nursing techniques to reduce oxygen consumption and monitor the balance of input and output; after providing a healing environment and positioning aids, reduce invasive treatment and environmental stimulation, and achieve a stable sleep; parents use The video meeting guests understand the development and treatment of related diseases, so as to reduce anxiety and rebuild the parent-child relationship.

Conclusions

COVID-19 is an emerging infectious disease. The author is deeply inadequate in professional care for this disease. After discussing with the infection control team, it is recommended that the parents of the case can only enter the intensive care unit for visits after returning to the country for two months to reduce the risk of infection. Special care is recommended in the future. In each case, cross-team discussions are held at appropriate times to make the nursing measures more complete and individualized, so as to improve the quality of nursing care, and hope that this nursing experience will provide a reference for caring for such patients in the future.

Contact: YU CHU lu

Buddhist Tzu Chi Medical Foundation Dalin Tzu Chi Hospital
Chia-Yi, vicki74216@gmail.com

Clinic Operation During the COVID-19 Pandemic: Case of a Medical Center in Taiwan

SU Chia-Huei, SU Pei-Hong, SU Pei-Chen, CHEN Li-Hua, YANG Jhen-Hua

Introduction

COVID-19 has a force similar to that expected of World War III. Its extremely strong spreading power has affected global medical treatment, influencing both the health and well-being of people worldwide and prompting national health policy reform. In response to the COVID-19 epidemic, medical institutes in Taiwan have complied with health administration policies and implemented access control and restrictions on hospital capacity to thoroughly block routes from transmission sources.

Purpose/Methods

Our hospital took inspiration from the establishment of field hospitals in foreign countries and established a "back to the home country clinic," introducing video chat consultation and treatment to prevent patients with a high risk of being contagious from entering the hospital and causing cluster spreading.

Results

This approach can prevent high-risk patients from entering the hospital while continuing to meet patients' needs for medical treatment during the pandemic. This strategy alters the mode of patient-doctor visits. We surveyed patients, who reported a high degree of satisfaction with this procedure.

Conclusions

We increased the sense of security and trust in our hospital among patients and medical staff, maintained the thinking mode of continual operation, provided the community with comprehensive and safe medical services, and protected the safety of all medical staff. Our hospital established a standard for epidemic prevention, which we hope can become a model for medical institutes worldwide.

Contact:

u105540014@gmail.com

Contingency nursing measures and results for taking care of COVID-19 confirmed patients

LAI Chien Hsiao, CHEN Hui Chi

Introduction

Coronavirus disease in 2019 (COVID-19) is a new pandemic that spread rapidly in the world. Good education and training for nursing staff that take care the patients is a prerequisite to prevent the nosocomial spread of this highly contagious disease with high mortality rate.

Purpose/Methods

1. Arrangement of the complete education and training for 13 nursing staff and 2 cleaning staff in the dedicated ward for professional knowledge of COVID-19 as well as donning and doffing of personal protective equipment (PPE) to implement complete care and cleaning and disinfection of the environment.
2. Planning of the route for working in the isolation ward.

Results

1. Among 13 confirmed cases, 8 were cured and discharged, 2 deteriorating patients were transferred to medical center, and for the other three; the treatment is still ongoing in the hospital.
2. No nosocomial transmission occurred.
3. Setting up management reports and implementation of the management system.

Conclusions

Complete education and training provide correct and effective care measures. Recovery of patient health and prevention of nosocomial transmission was achieved via adherence with infection control procedures such as donning and doffing PPE, hand hygiene, cleansing and disinfection.

Comments

Based on the experience of preventing SARS outbreak in Taiwan 18 years ago, remarkable disease prevention at the initial phase of COVID-19 pandemic was achieved via infection control system set up previously. Sufficient PPE and correct donning and doffing, as well as good hand hygiene, all together enhanced the cure rate of patients and blocked the spread at the domestic level.

Contact: LAI Chien Hsiao

Landseed Hospital, suyulai@gmail.com

Implementation of Medical Social Collaboration -Home Rehabilitation Team (MSC-HRT) Service to Improve Rehabilitation Outcome and Quality of Life for Elderly Patient During COVID-19 Pandemic

CHENG Sze Yee, LEUNG S F, CHAN K K, TANG W K, WONG C L, NG P L, HUI N, TSANG W Y, SIM T C, SHA K Y

Introduction

For elderly patients undergoing hip fracture surgery or stroke with varying degrees of physical impairment, timely rehabilitation has been documented in maximization of function and improvement of prognosis and quality of life. However, part of day and out-patient rehabilitation services had been scaled down or suspended due to the impact of Coronavirus 2019 (COVID-19). The objective is to explore the effect of MSC-Home Rehab Team (HRT) service on functional outcomes, quality of life component and rehabilitation access of elderly patients during the COVID-19 pandemic.

Purpose/Methods

A set of pre/post test experimental design is adopted. Between January 1 and October 31, 2020, 84 patients (average age 80; 56 hip fracture and 28 stroke) without any community rehabilitation services were recruited. MSC-HRT provides timely referral of appropriate community services, and provides <12 weeks of nursing consultation and home rehabilitation training. Various functional performance evaluation scales and questionnaires to evaluate functional effects and service satisfaction.

Results

Significant improvement ($p < 0.005$) including Modified Functional Ambulation Classification scale, Timed Up and Go Test, Elderly Mobility Scale, Modified Rivermead Mobility Index, Modified Barthel Index (MBI) and Lawton Instrumental Activities of Daily Living Scale. 95% of patients felt better competency in community rehabilitation through an improved knowledge base (86% agreed), self-care ability (94% agreed) and individual care plan (93% agreed). Although 40% of participants were worried about the risk of contacting COVID 19, 79% of participants requested to maintain the service in the future. Overall, 93% of participants found the service had met their rehabilitation needs and expectations.

Conclusions

The program provides timely on-site home rehabilitation, improve patients functional outcomes, attitudes towards disability and caring skills, thereby enhancing the quality of life. However, effectively responding to the risk of community cross-infection can improve the motivation of patients to participate to yield positive outcomes. A more standardized service framework, workflow and selection criteria can further enrich the service model and care delivery.

Contact: CHENG Sze Yee

Hospital Authority-United Christian Hospital
dbeedora@yahoo.com.hk

My quarantine station (war) post, I am proud

CHIU Guei-Fen

Introduction

I am a woman working in the administrative unit of a hospital. I never thought that there would be a day of standing guard, but just after the severe and special infectious pneumonia outbreak in Wuhan, China at the end of 2019, the first occurrence in Taiwan on January 21, 2020. A confirmed case of immigration from abroad, the first domestic infection case occurred on January 28, Datong Hospital also began to establish the Datong Hospital Resistance Command Center on January 28, and held daily meetings, depending on the development of the epidemic. There are and released relevant countermeasures and methods.

Purpose/Methods

I started my day at the quarantine station in Datong Hospital on January 29, about 1-2 shifts a week, 4 hours per shift, yes, that's right. Standing for 4 hours, it's inconvenient to drink water and go to the toilet. It is a big test for me with irritable bowel disease. When the weather in February is cold, I still tremble while wearing a thick coat and standing at the door. It's really a challenge to stand outside and take the temperature of the patient while wearing an isolation suit, protective mask, mask, and gloves in the weather in April and May.

Results

But epidemic prevention is like battle. There is no such rigorous protection. There is a gap in the hospital being invaded by the new crown virus. Once the hospital has an outbreak of nosocomial infection, like the Taipei City Peace Hospital in 2003, it will be closed. The epidemic will be out of control; so the whole Quarantine protection must be leak-proof. It was due to the efforts of all colleagues in the hospital to abide by the government's policies. On May 19, Datong Hospital announced that the quarantine work of administrative staff could be decommissioned.

Conclusions

Taiwan's outstanding performance in epidemic prevention has been praised by various countries, and Taiwan is involved in foreign affairs. A bright mark has been left in history; Taiwan's success in epidemic prevention is not only the efforts of the central government's command center, but also the pride of the people of Taiwan. Epidemic prevention is a clock in the community's difficult times, and a common social sentiment.

Contact: CHIU GUEI FEN

Management Department
0870023@GMAIL.COM

Strategy of Preventing the Spread of COVID-19 for Meal Delivery in a Medical Center in Taiwan

FENG Hsin-Chun, LIU Tsung-Wen, CHEN Hui-Chun, HSIAO Pei-Chen

Introduction

COVID-19 is a global public health problem, SARS experience helped us effective use infection control strategies in Taiwan. Nosocomial infections can include meals delivery. The employees deliver meals to patients except the airborne isolation based on the contact sign on the door of the patients room. Each worker is in charged at least 5 ward units a meal. Prior to COVID-19, we use disposables only in airborne isolation room and special dietary order. And "isolation" is shown in the meal card.

Purpose/Methods

To reduce the unnecessary risk of exposure to our workers, a policy was made by a multi-department meeting in March, 2020. We improved the electronic dietary system, therefore, the physicians can order "isolation: deliver to nursing station or deliver to patient". The nurses put a contact isolation sign on the hospital isolation rooms. We educate our workers (1) the contact sign must be consistent with meal card (2) identify wrong diet order and correction (3) Direct mail diet order advocacy posters to nursing station.

Results

Any mismatches must be reported to the registered dietitian immediately. From 2020 March to 2021 April, there were 228 mismatch reports, only 2 meal delivery was incorrect. The meal deliver correct rate was 99.9%.

Conclusions

To fight against the spread of COVID-19, hospital diet delivery should be considered due to closely and frequent contact with patients. An effective strategy is very importance for the infection control, and make a suitable and sufficient assessment. Most of food service workers can clearly identifies the contact sign and report the wrong isolation meals order. The differences between isolations, effective safety management for food delivery avoiding cross-contamination from COVID-19.

Contact: FENG hsin chun

National Taiwan University Hospital
sleep127@yahoo.com.tw

The impact of COVID-19 on Health Promotion

PASTORE Elisa, SCARPINI Gian Carlo

Introduction

ASST Pavia has been engaged since 2018 in promoting health through the application of good practices that touch on various issues such as nutrition, physical activity, combating smoking and addictions. The company had developed projects in 2020 and 2021 but, like all healthcare companies, it had to reorganize its activities in response to the COVID-19 pandemic.

Purpose/Methods

In the pandemic context the Company has set by itself the target of maintaining good practices already activated in previous years, including health promotion activities carried out by the Occupational Health Physician (OHP), such as minimal-advice for the promotion of health and healthy lifestyles. In this regard, in 2020 the OHP office was integrated with one Occupational Health Physician to deal with the emergency and ensure the continuation of health promotion.

Results

In 2020 the Occupational Health Physicians gave minimal-advice to 207 workers at risk for smoke and to 258 workers at risk for obesity/overweight, on the whole they raised the awareness of 1393 workers about healthy lifestyles. It is noted that in 2020 there was a -5% change of the number of workers made aware of healthy lifestyles compared to 2019.

Conclusions

In general the pandemic had a negative impact on health promotion, resulting in less interest from workers on healthy lifestyles, in face of the most serious existing problems. The increase of the number of OHP, despite the increase of OHP activities related to COVID-19, has made it possible to guarantee health promotion interventions, limiting their reduction compared to the previous year.

Contact: SCARPINI Gian Carlo

gian_carlo_scarpini@asst-pavia.it

Effects of COVID-19 Promotion on Applying New Media

YAN Jyun Huei, YEH Hsin Han

Introduction

Due to the rapid change and diversity of COVID-19 health care-related information coming from multiple sources, there might be complicated, contradictory, or even inaccurate information occurring from time to time. It is not easy for the public to get accurate information. Yet, the situation has not slowed down in the post-epidemic period, there is still a potential threat. Therefore, it is very important for the public to have correct and quick access to the epidemic prevention measures.

Purpose/Methods

Our goal is to improve the public health awareness with simple and expeditious means by promoting the government's epidemic prevention information, hospital's epidemic prevention

measures, and health knowledge of COVID-19 on platforms of information and communication technology, including Facebook, Youtube, Line, and other emerging social media. We also compared the difference between the public's perception of the epidemic message and other hospital promotion, and finally investigated the public's satisfaction analysis by questionnaire.

Results

From January to December 2020, we have compared the messages of COVID-19 and other information in hospitals. 1.150 Facebook posts were written, with each post reaching 6,000 people. 2.20 Youtube videos were produced, with each video receiving 200 more views than the others. 3. There is a 30% growth of followers on Line. The final questionnaire found that 85% of the respondents were satisfied, which shows that hospitals using the new media to promote its policy has a significant effect.

Conclusions

In the past, hospitals have been unable to reach the public in a timely manner through policy advocacy. Nowadays, we can use emerging media and apply diversity marketing to spread accurate, accessible, and implementable health and safety information, enhancing the public's ability to search, understand, judge, and apply health information. At last we can reduce the impact and influence of the COVID-19 outbreak.

Contact: HSIN HAN Yeh

Kaohsiung Municipal Hsiao-Kang Hospital

yeha114161@gmail.com

Study on the difference in the number of patients before and after the COVID-19 in a regional teaching hospital in northern Taiwan

LIN Hui-Lan, CHEN Yi-Ju, FU Wen-Cheng, CHU Wan-O, LIN Ching-Feng, LUO Jiing-Chyuan, LI Ling-May

Introduction

Although the covid-19 is well controlled in Taiwan, the epidemic has a huge impact on hospital operations and the body, mind of medical staff. This study focuses on the comparison of the difference in the number of outpatients, emergency departments, and inpatients before and after the epidemic, and the difference between outpatients waiting for medicine. Which can be used as a reference for manpower adjustment when the epidemic breaks out in the future.

Purpose/Methods

In this study, the number of outpatients, emergency departments, and inpatients in hospitals, and the waiting time of outpatients before one year of the covid-19 from January to December 2008 VS during the outbreak of the covid-19 from January to December 2009, used Paired T- test, two-tailed test compares the difference between two periods.

Results

The number of outpatient prescriptions decreased from 33.54 thousand before the epidemic to 29.53 thousand ($P=0.0001$), the

number of emergency prescriptions was reduced from 3.81 thousand to 3.11 thousand ($P=0.003$), and the total number of hospitalized person-days was reduced from 11.83 thousand to 11.41 thousand people ($P=0.045$). The results showed that the number of outpatients, emergency departments, and inpatients before and after the outbreak of the covid-19 was significantly reduced.

Conclusions

During the covid-19 epidemic, in order to cooperate with government, reduce non-emergency medical care, go to the hospital, the number of patients in each hospital has decreased. Medical personnel have sufficient time to serve patients, but hospitals still need to consider operational performance and operating costs, and also need to reserve human energy when the epidemic breaks out again. Human resources, the above changes in the number of patients provide a reference for the hospital's manpower allocation.

Contact: LIN Ching-feng

Keelung Hospital Ministry of Health and Welfare
chingfeng01@gmail.com

Applying the improved chronic disease medicines receiving system to reduce the possibility of patients suffering from COVID-19 infection

TSAI Ming-Chi, CHENG Chin-Chia, CHENG Chien-Hung, HSU Man-Ling, HUANG Ho-Yi, TSAI Li-Hui

Introduction

During the epidemic prevention period of COVID-19, patients still have chronic disease prescriptions to receive medicines. This project is designed to protect patients' medical treatment rights in receiving medicines and also has an epidemic prevention effect. Failure Mode and Effects Analysis (FMEA, Failure Mode and Effects Analysis) plans to improve the chronic disease prescriptions receiving methods and keeping patients safe. After the online use, patients can receive chronic disease prescriptions and medicines, and avoid the spread of COVID-19 effects.

Purpose/Methods

This project uses Failure Mode and Effects Analysis (FMEA), and considers the people in the hospital being infected are identified as system failures. In Taiwan, patients need to bring their health insurance cards and chronic disease prescriptions to the hospital to receive medicines. The actual actions are explained by the following four steps: 1. Modify the health insurance card data uploading and medicines number card printing mechanism. 2. Added on-site assistance personnel. 3. Formulate a temporary window for medicines collection.

Results

We did a questionnaire survey and statistics were conducted on patients who received chronic disease prescription. As a result, 64.7% of patients gave a positive affirmation, 23.5% said they could not accept the method of receiving them outdoors, and the rest were unwilling to answer. There are two main unacceptable reasons: 1. The patients are unwilling to change the original

chronic prescription receipt habit. 2. Outdoor chronic disease prescription receipt will be affected by the weather, such as the sun or rain.

Conclusions

Although the current COVID-19 pandemic is due to Taiwan's full prevention and advance deployment, there are still local cases recently. However, other countries in the world are still in dire straits. It is highly likely that the COVID-19 virus will make a comeback. We must be ready at any time, so that we can provide assistance to patients and colleagues for their health and safety as quickly as possible when the situation comes.

Contact: TSAI Ming-Chi

maxima.work@gmail.com

Management of hypoxemia in SARS-CoV-2 infection

HUANG Hsiu-Chuan

Introduction

COVID-19 pandemic has proven to be a challenge in different areas of care for patients. This topic will discuss specific aspects of hypoxia and hypoxemic. In patients with clinically well-tolerated mild to moderate hypoxemia (silent hypoxemia), the risk of sudden respiratory arrest during emergency intubation. Maintaining oxygen to target peripheral oxygen saturation (SpO_2) of $\geq 94\%$.

Purpose/Methods

The respiratory infection caused by SARS-CoV-2 exhibits different physio-pathological, showing the presence of endotheliitis, thrombotic vascular events, and a delayed hyperinflammatory systemic reaction. Hypoxia is defined as a reduction in oxygen levels in tissue, and lactate production and anaerobic metabolism. Hypoxemia is defined as drop in the arterial pressure of oxygen below 80 mmHg.

Results

There are five pulmonary mechanism that result in hypoxemia including alveolar hypoventilation, right to left shunt, diffusion-perfusion abnormality, diffusion impairment and ventilation-perfusion mismatch. COVID-19 patients has been defined as a form of hypoxia that is well tolerated by early stage with no sensation of dyspnea. According to the berlin definition of ARDS, such as pulmonary compliance values ≤ 40 ml/cmH₂O. Early respiratory failure caused by COVID-19, lung compliance values close to normal are observed, unlike in classic cases of ARDS.

Conclusions

In COVID-19, clinical deterioration seems different from that observed in ARDS secondary to bacterial pneumonia. Its clinical correspondence, represented by the increase in respiratory rates, could be a turning point when evaluating the need for orotracheal intubation, but risk of sudden respiratory arrest during an emergency intubation, which could expose healthcare workers to infection. Severe hypoxemia do not experience increased work of breathing and may explain in part the broad differences in outcomes.

Contact: HUANG HSIU-CHUAN

Taipei City Hospital
rt660803@gmail.com

The opinion on vaccination for COVID 19

WU Meng-Hsuan

Introduction

Under the COVID-19 attack, the number of global death exceeded millions. Although many defensive measures had been taken, they had not been able to decrease the infection rate of Covid 19. Vaccination was the ultimate method.

Purpose/Methods

Divide the people groups into the following six categories: 1. Active medical staff, cleaning staff 2. Pilots, flight attendants, customs and airport staff 3. Police and firemen 4. transportation, postal staff 5. Traditional markets, supermarkets and catering delivery 6. The general public. According to the classification, the priority to apply vaccination was determined. However, exceptions are as follows, 1. Those who are PCR-negative under cluster infection will be given priority. 2. For the active elderly with chronic diseases, pregnant women can freely choose the priority by themselves. 3. The residual opened vaccines could be given to the staffs of neighboring police stations, fire stations, and market.

Results

The project can strengthen protection for hot spots of outbreaks and reduce the waste of vaccines.

Conclusions

The advantage of this approach was that it could reduce large-scale mutual infection, did not waste vaccine and made the control system of the operator more efficient.

Contact: WU Meng-Hsuan

Kaohsiung Medical University Chung-Ho Memorial Hospital
a7211121@yahoo.com.tw

Covid-19 vaccine vaccination plan-taking a regional hospital as an example

HUANG Hsin-Jou, ZHENG Wei-Ting, LIN Chun-Yu, HUANG Ming-Ren, YEN Chia-Chi

Introduction

In response to the warming of the COVID-19 epidemic in Taiwan, the government announced that the country has entered an epidemic alert state. Therefore, we implemented a Covid-19 vaccination plan to protect the health of staff and patients.

Purpose/Methods

The vaccination plan includes: 1. Set up a vaccination team, 2. investigate employees' willingness to inject vaccines, 3. Arrange the order of vaccination according to the risk principle set by the government, 4. Vaccination site setting (including injection area and 30-minute observation rest area), 5. The vaccination team provides medical care consulting services, so that employees can receive comprehensive care during the entire vaccination process. 6. Formulate a supportive leave policy to ensure the

willingness of medical care workers to report adverse reactions after vaccination

Results

Our designated ward and high-risk colleagues who take care of Covid-19 confirmed patients have all received vaccination, the vaccination rate has reached 100%. The entire hospital staff includes cleaners and outsourced personnel, and the vaccination rate has reached more than 90%.

Conclusions

In the face of the outbreak of the epidemic, hospital staff cooperated with government policies to ensure the maintenance of medical manpower and the maintenance of medical care capacity, with the purpose of continuing to protect the health of the people.

Contact: HUANG hsin-jou

Kaohsiung Municipal Min-Sheng Hospital
hsinjou1224@gmail.com

Investigating the Effectiveness of Maintaining Safe Distancing for Epidemic Control in Employee Health Promotion Activities with Electronic Devices.

TSAO Yu-Chieh, CHIU Hui-Ping, HSIEH Tsai-En, HSU Su-Chun

Introduction

When COVID-19 swept across the globe in 2020, the staff of hospitals all across the world were under enormous pressure, and many big events in Taiwan were cancelled. While the health of hospital staff is an important national asset in epidemic control, we insist that health promotion activities for hospital staff should never stop. This study investigated how to maintain safe distancing for epidemic control in staff health promotion activities using electronic devices and its effectiveness.

Purpose/Methods

The 50 cases were selected for the study from medical center staff having metabolic syndrome found in the employee health checkup as the subject, and a total of 45 cases completed the study. The health promotion activities maintaining safe distancing for epidemic control using electronic devices included: mobile pedometer intervention for 12 weeks with a daily count of 6,000 steps, using the self-check list for diet control and exercise and exercise videos distributed over LINE groups, and nutrition health education.

Results

A pretest and a posttest were conducted one week before and after the study with items including the physical fitness test and health knowledge questionnaire. The knowledge accuracy rate in the pretest and posttest of the health management talk was 40% and 80% respectively. In the physical fitness test, after the intervention of health promotion activities using electronic devices, significant improvement was noted in body fat percentage, muscular endurance, flexibility, grip strength, physical fitness index, and back muscle strength ($p < 0.01$).

Conclusions

In response to the epidemic control policies of Taiwan's government, group health promotion activities were not allowed when all group activities were cancelled. The intervention of electronic devices maintained safe distancing for epidemic control in health promotion activities and enabled the subject to make significant progress in the physical fitness test. The integration with the everyday life of electronic devices enable the diversification of health promotion strategies from one-way to multiple.

Contact: HSIEH tsaien

National Cheng Kung University Hospital
hsiehs514@gmail.com

Study of factors on employees' lifestyle during Covid-19 pandemic.

CHEN Sih-Hua, CHANG Chia-Fang, CHEN Ling-Sui, HWANG Shang-Jyh

Introduction

During the COVID-19 epidemic, it is worth investigating the health promotion lifestyle practices of hospital staff under the pressure of investing in prevention operations and uncertainty about the virus.

Purpose/Methods

The target population of this study was all types of employees in the hospital, a cross-sectional design was utilized, and the structured questionnaire was used. The questionnaire included basic information, epidemic impact, Health-Promoting Lifestyle, and perceived health status. A total of 619 cases were collected from a medical center in Taiwan.

Results

The score of health promotion lifestyle was the highest with interpersonal support, and the score of health responsibility and sports health care was the lowest, which was similar to the results of most domestic studies. The participants' gender, age, education level, marital status and work seniority are the main factors affecting health promotion lifestyle. Among them, men with a balanced diet are higher than women. Older and married in self-realization, health responsibility, and balanced diet is higher than young and unmarried. The person with master degree (or above) is higher in the self-actualization, stress management and balanced diet than that with university (include specialized subject). The health responsibility of the senior staff was higher than that of the junior staff, while the interpersonal support of the junior staff was higher than that of the senior staff.

Conclusions

Most participants believed that COVID-19 had an impact on their daily life and had no impact on their health status. According to recent external research shows that people are likely to stay at home due to the epidemic, resulting in a decrease in physical activity. Long-term estimate will still affect health. It is suggested that the hospital can cooperate the new home lifestyle, planning to promote the mild-to-moderate movement measures that occupy the home. Encourage employees to purchase wearable physiological measurement devices to increase their attention to

exercise, in that to ensure the maintenance and improvement of employees' health-promoting lives.

Contact: CHEN sih hua

ST.Joseph Hospital
 802 Kaohsiung City,
csw6910@gmail.com

Death Anxiety between Caregivers for COVID-19 Patients and Caregivers in Hospice Care

KAO Lin-Li, CHANG Chih-Ming

Introduction

Irvin D. Yalom (2003) believes that death is the source of anxiety. When people are faced with the threat or situation of death, death anxiety will follow. This study explored the degree of death anxiety of caregivers having contacted COVID-19 patients (group A), and compared with caregivers for patients in hospice care (group B). The findings can be referred to in the course of counseling and intervention.

Purpose/Methods

Through the Chinese version of Revised Death Anxiety Scale (RDAS), the study tested 38 caregivers in group A including doctors and nurses, and 16 caregivers in group B including doctors, nurses, and social workers. The scales also recorded their most concerns. One-way ANOVA was used to analyze the significant difference of the total scores and the three sub-scales ("fear of the process", "loss of autonomy", and "helplessness after death") between two groups.

Results

Statistics showed that the average total score of group A was significantly higher than that of group B ($p=.046<.05$); however, the three sub-scales indicated that there was a significant difference only in the "helplessness after death" ($p=.011<.05$). Compared with the caregivers' most concerns, the findings coincided with the fact that most caregivers in group A were worried about the possibility of infection to their family.

Conclusions

According to the results, anxiety of caregivers being at risk of death was higher than those facing a predetermined death; however, the source of anxiety was the risk of infection to caregivers' family members rather than themselves. The reasons might be that Taiwan's successful experience in pandemic control had reduced caregivers' own anxiety, and Chinese people attached more importance to the family than oneself. The result shows the cultural differences.

Contact: CHANG Chih Ming

Kaohsiung Municipal Min-Sheng Hospital
psy7034@gmail.com

Confronting the Psychological Effects of the COVID-19 Pandemic on Healthcare Workers: A Response from Positive Psychology

SU Chi-Chun

Introduction

Since the outbreak of COVID-19, it has posed a threat to human health worldwide and has placed a heavy burden on the healthcare system. Healthcare workers face more worries and pressure, and even many countries are already overburdened with existing resources.

Purpose/Methods

This study used a document analysis to examine the psychological state of healthcare workers for the COVID-19 and responds with positive psychology theory to find ways to mitigate the potential situation. A total of 647 papers in English and Chinese were identified from the search, 58 of which were included in the reviews.

Results

It was found that COVID-19 commonly causes psychological distress among healthcare workers, including the effects on depression, anxiety, low mood and nervousness. Many studies strongly recommend that government resources be invested and mental health programs be established.

Conclusions

However, the problem is imminent. This study uses the theory of positive psychology, from an individual perspective, which recommends to identify personal strengths and construct positive emotions to achieve positive life outcomes through development and application.

Contact: SU CHI-CHUN

Kaohsiung Municipal United Hospital
chichun346@gmail.com

Telehealth of multi-professional intervention to assist mental illness patients of dayward to live at home to prevent covid-19 epidemic

LEE Chia-Yin, LIANG Kang-Sheng, KANG Chia-Ling, CHEN Jin-Shuen

Introduction

The rapid spread of the new covid-19 epidemic around the world by the end of 2019 has brought many changes to people's living patterns, and with the rising number of confirmed and mortality rates, the world is in a state of anxiety. When the outbreak broke out in Taiwan, more than 300 cases were confirmed every day, many institutions were asked to suspend operations and reduce the flow of people in order to prevent the spread of the epidemic. Patients of mental illness cannot come to the hospital to participate in rehabilitation programs in dayward since 2021.02,

because of epidemic prevention factors and the activities of the dayward have been discontinued.

Purpose/Methods

Telehealth to implement the following measures: 1. establish occupation therapy line group: in line group, occupational therapists provide health-related information and activities every day to encourage patients to execute tasks on a daily basis. Patients also share with each other in group what they do at home every day, supporting and encouraging each other. 2. telephone or video visits by nursing staff weekly: for understanding the maintenance of patients' regularity and drug compliance.

Results

There are 16 patients to participate in occupational therapy line group. They have interpersonal interaction in line, like sharing craft products, sports, hobby, housekeeping, etc. There are 48 patients who were visited to their life style and regular routine at home. Nurses will provide advice on activities for patients who lived at home while living lazily. There are 1 patient by the doctor assessed had to be admitted to acute psychiatric ward.

Conclusions

Under the epidemic, patients of mental illness not only encounter the anxiety of the epidemic. How to maintain the regularity of daily life, stability of the disease is a challenge to face, telehealth care is the future tendency. The experience of telehealth care is a new approach for us, and strengthening telehealth care skills is an urgent need for health care workers under the alert of the outbreak.

Contact: LEE Chia Ying

lichaiying@gmail.com

An Exploratory Research on Nursing Care in a Psychiatric Rehabilitation Ward during the COVID-19 Pandemic

LI Pei-Shan, LU Huei-Lan, WU Wen-Cheng

Introduction

During the COVID-19 pandemic, preventive measures, guided by Central Epidemic Command Center (CECC), are taken in psychiatric rehabilitation wards to prevent viral transmission, and to improve the quality of nursing care.

Purpose/Methods

The Nursing Infection Prevention and Control (NIPC) program is implemented in a psychiatric rehabilitation ward in southern Taiwan. Five steps are included in this program: 1. Make NIPC preparations 2. Formulate NIPC measures 3. Double-check NIPC principles (in line with those of CECC) 4. Raise the medical staff's awareness of NIPC 5. Provide emotional comfort for psychiatric inpatients and their families. For this purpose, information about COVID-19 and infection control is disseminated regularly in ward meetings. Protective measures, like social distancing, isolation, triage, adjustments to food delivery and drug administration are taken. The benefits of these adjustments are explained to the inpatients. The execution of the program is tracked, examined, and altered if necessary, so that the result can be analyzed and the program can be further remodeled. As infection prevention

control is implemented, the nursing quality is enhanced and the risk of contracting an epidemic is lowered.

Results

There are five findings after the implementation of the program. 1. There are 30 fewer cases of upper respiratory tract infection among inpatients over the same period of the year. 2. The participation rate of the infection control rises from 73% to 98.3%. 3. The satisfaction rate concerning isolation and triage is up to 97%. 4. The awareness rate of COVID-19 elevates from 72% to 94%. 5. As for the nurses' response to the epidemic, their execution rate of preventive measures reaches 100%. Both the inpatients and nurses give positive feedbacks. All in all, the NIPC program helps reduce the patients' anxiety, lower the risk of contracting the epidemic, boost the nurses' confidence, and, most importantly, enhance the nursing care quality.

Conclusions

The application of the NIPC program strengthens the collaboration of the medical staff and makes it possible to review the procedure of infection control. The deficiencies of the program are thereby remedied. The professional aid along with cooperation is key to thwarting the spread of the coronavirus and enhancing the quality of nursing care.

Contact: LU Huei-Lan

Jianan Psychiatric Center, MOHW
71742 Tainan, 14404@mail.cnpc.gov.tw

Investigate the Emotional Distress of Nursing Attendants in Nursing Home in Northern Taiwan During the COVID-19 Pandemic

CHEN Ya-Fang, LIN Mei-Ru, LIANG Ssu-Chia, CHEN Sung-Yun

Introduction

Some studies have confirmed that the COVID-19 pandemic will have a negative effect on mental health of people and medical workers around the world, but the emotional status of nursing attendants (NAs) in nursing home is rarely discussed. Our unit is a nursing home in northern Taiwan, with a total of 40 beds and a total of 17 NAs. This study aims to understand the emotional conditions of nursing attendants during the COVID-19 pandemic.

Purpose/Methods

Use Brief Symptom Rating Scale (BSRS-5) to collect data from an online questionnaire for NAs from May 15 to July 1, 2021. This study focuses on has not been vaccinated but given guidance and teaching about COVID-19 care and after injection one dose vaccine of nursing attendant's emotional condition. The scale contains 5 questions: measuring insomnia, anxiety, anger, depression, and low self-esteem. A total score of 6 or more represents emotional distress, and should be involved in stress management. In addition, Question 6 measures suicidal ideation. If the score is 2 points or more, it is recommended to seek psychiatric treatment.

Results

The average age of NAs is 52.1 years old, 7 males (41.2%) and 10 females (58.8%), with an average working experience of 8.6

years. The average total score before vaccination was 2.94 to 5.15 points, especially in the measurement of insomnia and stress items. The score was significantly higher than other items, but the average stress score did not exceed 6 points, indicating that the state of emotional distress was not reached. However, the average total score after vaccination can be reduced to 0.36 to 0.78 points, which shows that before vaccination, it will increase the emotional pressure of NAs in caring elderly. The scores measured before and after suicide ideation were all 0 points.

Conclusions

At present, the COVID-19 vaccine has been confirmed by research to reduce the risk of infection. According to our research results, the emotional pressure of NAs after vaccination is naturally reduced. Combined with given guidance and teaching about COVID-19 care, the NAs will not have emotional distress when caring cases.

Contact: CHEN YA-FANG

Taipei City Hospital, Young Ming Branch
11146 Taipei City, b1655@tpech.gov.tw

Effectiveness of Applying Preparation Strategies of COVID-19 in Pediatric Respiratory Care Wards of Regional Hospitals in Northern Taiwan

TING Hsiao-Chen, HUANG Hsiao-Ling, CHEN Shu-Nuen, HO Hsuan, TSAI Yi-Fan

Introduction

As a regional hospital's pediatric respiratory care wards (PRCW) located in the north of Taiwan, we treat patients from long-term bedridden or children with rare diseases. They are highly susceptible group patients to any disease. Nevertheless, the increasing contact frequency and time between staff and patients raise the risk of spreading the epidemic. By using preparation strategies of COVID-19, we expect to prevent cluster infection, increase patient safety and quality of care at the same time.

Purpose/Methods

The 4W1A strategies, focusing on infection prevention, have been implemented since February 2020. (1) Wash hand: The unit has installed a washbasin beside the unit entrance and hand sanitizer per sickbed to increase the convenience of handwashing. (2) Wear Face Mask: A surgical mask-wearing is required to access the ward. (3) Watch and monitor: Visitors are required to measure their body temperature and provide their TOCC status. This information is recorded and managed in the computer system. (4) Ward visiting time control: One-hour visit, one visitor per sickbed daily. Using E-visiting is promoted. (5) LINE group (Application): Construct a message group with caregivers and PRCW medical team to post epidemic prevention information, instructions for infection control and visitor guidelines.

Results

The statistical period is from March 2020 to April 2021. Randomly measured the score handwashing average score was 100 points. And the number of the unit access with a total of 3052 accesses. Among these accesses, the average body temperatures were 36.4 degrees Celsius. The average visiting time is 45 minutes per visitor. There is no cluster of infections in PRCW unit.

Conclusions

The patients of the PRCW are vulnerable groups of disease infection. During the COVID-19 pandemic, the unit manages the access effectively. The unit is using the computer system to control the entrance of the visitors and caregivers. The high-risk groups are prohibited from visiting. These measures ensure the safety of the ward.

Contact: TSAI YI-FAN

Taipei City Hospital, Young Ming Branch

b1717@tpech.gov.tw

Survey on the Impact of COVID-19 on Actual Life Conditions and Health in Japan

KONISHI Tuyako, NEGISHI Kyota, DOI Nao, YOKOYAMA Sachiko, MATSUMOTO Hiroaki

Introduction

Owing to the COVID-19 pandemic, Japanese citizens were asked to exercise long-term self-restraint under the emergency measures decreed from April 7 to May 25, 2020. Medical institutions have been accepting patients with fever by implementing infection protection measures.

Purpose/Methods

The purpose of this study is to investigate how the spread of infection has affected the lives and health of individuals. From August 1 to September 30, 2020, approximately 600 patients, users, community union members, and staff completed a questionnaire with unique items and a basic checklist developed by the Ministry of Health, Labour and Welfare. The questionnaires were answered anonymously.

Results

1) Significant deterioration was observed in activities of daily living, oral function, and cognitive function, and social withdrawal and depressive tendencies during the self-restraint period were also observed ($p < 0.01$). 2) The incidence of mental illness was highest among staff. 3) Regarding the worsening of the depressive tendency, psychological conditions such as "loneliness", "depressive feeling", and "anxiety" were observed. 4) There was a correlation between "smile" and the overall evaluation score.

Conclusions

Long-term life with imposed self-restraints and the effect of the "new normal" has had a great impact on life and health status in general. Particularly, the effect on mental health is significant. There is also a significant psychological impact on staff members who are at direct risk of infection. In the future, we need to address the wellness needs of our staff members by introducing

"new ways of interacting with people" in addition to implementing infection control measures.

Contact: SAITOH Fumihito

Oizumi Health Cooperative Hospital

fumisaitoh@gmail.com

Impact of COVID-19 Pandemic on Health and Lifestyle of Residents of Japanese Elderly Community

TERAOKA Kaori, TOKUNAGA Satoshi, MATSUMOTO Hiroaki, NEGISHI Kyota

Introduction

The COVID-19 pandemic has shown that restrictions on outdoor activities by the government and local governments have led to a decline in the activities of the elderly, but their impact on health, behavior and lifestyle. Has not been elucidated.

Purpose/Methods

The purpose of this study was to investigate changes in the lifestyles of local residents during the period of self-restraint due to the new coronavirus infection. From July to September 2020, we conducted a questionnaire to 212 elderly people in the community (age 76.8 ± 5.9 years, 81.7% women). Weekly exercise time, daily activities, physical fitness, nutrition, oral status, cognitive status, and risk of depression were investigated before and during imposing self-restraint. The survey data were analyzed using descriptive statistics, Wilcoxon signed rank test, and chi-square test.

Results

Approximately 97% (204/212) of participants reported that they were unable to participate in or interact with their social circles. Their total exercise time decreased by an average of 215 minutes per week ($p < 0.0001$). Approximately 37% (78/212) of participants ranged from "not very good" to "not at all" in their subjective health status ($p < 0.0001$), with more than half of the participants (125/212). I reported that a pandemic had occurred. Limitations of daily life ($p < 0.0001$).

Conclusions

As a result, it was clarified that the lifestyle of the elderly in the local community was significantly restricted by the restrictions imposed by COVID-19. Given the potential for further restrictions in the coming months, clear guidelines are needed to enable access to social participation, physical activity, and timely healthcare and rehabilitation services for the elderly.

Contact: SAITOH Fumihito

Oizumi Health Cooperative Hospital

fumisaitoh@gmail.com

Giving voice to children to contrast psychological distress during Covid-19 pandemic

CENCI Luigina, ROSSI Lina, FRASCIONE Giulia, APPOLONI Pamela, BECCI Gioia, MARIANI Sara, PEZZELLA Marianna, SBERNINI Luca, APPOLONI Sara, RE Federico, ZAMMIT Agnese

Introduction

While the first lockdown during the Covid-19 pandemic was felt by young people as a common experience destined to be easily solved and shared with adults who were unusually home with them, during the second wave, the increasing level of contamination and number of deaths, the strictness of safety measures and prolonged remote teaching time, together with the interruption of afternoon activities, led to a negative evolution in psychological diseases in the most fragile population with family predisposition.

Purpose/Methods

The activity of a center focusing on Special Learning Disorders (SLD) provides support to school autonomy in approaching every-day homework. Our students used remote teaching during Covid-19 lockdown pandemic in public schools. We gave voice to children issuing an online survey and creating a calendar with characters from the Disney movie Inside-out: this helped us assess the feeling the greater number of kids associated with the pandemic. The children also had the opportunity to interview a person who survived the pandemic. The final step of the project included visits to different locations in response to children's longing for regular activities after the lockdown experience.

Results

The cross-section is represented by 16 people (8-17 years), suffering from SLD. By gathering answers and drawings we saw a majority of anger or serenity (joy) represented, with a substantial lack of fear for the consequences of the illness.

Conclusions

"Giving voice to children" proved the period of isolation and uncertainty not to have determined distress nor fear, but hope that this will soon only be seen as an experience raising the level of individual and common responsibility in dealing with adverse events in life, thus considering it an opportunity to try new lifestyles.

Contact: FRASCIONE Giulia
giulia.frascione@gmail.com

Poster Session 16: Child, adolescent and maternal health

Investigate the Efficacy of Wound Dressing Management Techniques in Preventing Pressure Injury in Pediatric Heart Surgery in the OR

HUANG Chiung-Hsuan

Introduction

In the perioperative environment, 12%-66% surgical patients occur with pressure injury. Pediatrics' heart surgery time is long and children's skin is thinner, so it's easy to cause skin scratch and pressure injury by the extrusion and friction. However, even after the clinical use of silicon material decompression tools, pressure injuries may still occur.

Purpose/Methods

This study aimed to explore the effectiveness of wound dressing for the prevention of skin pressure damage during heart surgery in pediatrics in the operating room. A quasi-experimental design was adopted. Participants were randomly assigned to the control group (general nursing care group) and the experimental group (general nursing care combined wound dressing disposal). Data analysis used SAS 9.4 for descriptive statistics and related analysis to compare the difference of category variants and continuous variables between the experimental group and the control group.

Results

Ninety-nine pediatric heart surgery patients participated in this project. Their average age were 8 months. The average BMI was 15.34; hemoglobin and albumin were 14.32gm/dl and 4.28g/L. There was no significant difference in demographic variables and nutritional status results between the two groups ($p > .05$). There were four patients (control group 3, experimental group 1) with pressure injuries, the average surgery time was 9.6 hours, which was higher than the non-stressed injuries. The pressure injury levels mostly were grade I and II. The highest rate of pressure injury occurred on the ankles, then the sacrum, phalanx of foot and scapula. But the results did not show significance between the two groups.

Conclusions

Based on the statistical results, no significant results confirmed that the use of wound dressing, compared with the existing protective care measures, can be more effective in reducing the pressure injury in pediatrics' heart surgery. It is worth recognition that the nurses can apply wound dressings and decompression tools correctly to avoid pressure injury in patients.

Contact:
flora020683@gmail.com

Whole-body Vibration exercise intervention improves children's cardiopulmonary function and motor development-case report

CHENG Cheng Chang, LEE Su, WANG Bomin, HUANG Qiaoying

Introduction

One-year-old child suffers from generalized weakness, respiratory failure, and poor motor development due to dermatopolymyositis. The child's blood oxygen saturation is usually lower than 90%, during the activity it is easy to wheeze and blood oxygen saturation is lower than 80%. The application of whole-body vibration exercise in patients can improve strength, functional activities, and blood circulation. The purpose of this study was to evaluate the effects of whole-body vibration interventions on child's cardiopulmonary function and motor development.

Purpose/Methods

The child receive 20 minutes 1-2 times of vibration exercise treatment per week and Pediatrics physical therapy for 20 minutes for 3 months. Pulse Oximeter monitoring is used during each treatment to ensure the safety of children. Results to assess changes in blood oxygen saturation and motor development (Peabody Developmental Motor Scales, PDMS Second Edition) before and after treatment.

Results

The child need to be given O2 for 24 hours before treatment, and no O2 is needed after treatment. During the activity child's blood oxygen saturation can be greater than 95%. The situation of shortness of breath during activities has also been greatly improved. Motor development scale (PDMS-2) total motor quotient Change from 43 to 67 before and after treatment.

Conclusions

The whole-body vibration exercise intervention in child showed significant on increasing mobility and motor development and increasing blood oxygen saturation during the activity.

Contact: CHENG CHANG CHENG
Kaohsiung Medical University Hospital
jjj1979@ms321inet.net

Distribution of etiology and dysfunction of children with developmental delay in Taiwan

LIU I-Hsiu, HUANG Wan-Yun, TUAN Sheng-Hui, CHEN Chu-Chin, SUN Shu-Fen, LI Min-Hui, CHEN Jin-Shuen

Introduction

Developmental delay is a non-specific neuropsychiatric symptom. It is necessary to first clarify whether the diagnosis is correct and the pathological manifestations and nature.

Purpose/Methods

In the Child Development Multidisciplinary Assessment Center of our hospital, 3,167 children from 2010 to 2018 were evaluated for development. The data were analyzed according to the relevant diseases, underlying etiologies, cause classification, and development retardation categories.

Results

The causes were divided into three categories: (1) 1193 (37.67%) of neurological causes, (2) 451 (14.24%) of familial causes, and (3) 1465 (46.26%) of those without specific causes. Among the neurological causes, the further classification including: 422 (13.32%) of labor brain injuries, 79 (2.49%) of congenital brain malformations, 318 (10.04%) of chromosome or genetic abnormalities, 23 (0.73%) patients with neurocutaneous syndrome, 26 (0.82%) patients with neurodegenerative disease, 200 (6.32%) patients with high-risk familial history, and 125 (3.95%) of other causes. In the 2010-2018 assessment cases, there were 2,161 (68.23%) language delays, 1,558 (49.19%) cognitive delays, and 1,326 (41.87%) motor delays. Accordingly, children with delayed development have a majority of language and cognitive development delay.

Conclusions

The distribution of development disorder categories shows the most in language disorder, followed by cognitive and motor development disorder. However, the existing speech therapists are relatively in shortage, indicating the need to reorganize the appropriate labor supply and medical services for pediatric rehabilitation.

Contact: LIU I-Hsiu

Department of Physical Medicine and Rehabilitation, Kaohsiung Veterans General H
bruce_pelagia@msn.com

Association between the use of oral rehydration therapy for childhood diarrhea and anxiety in their caregivers: A descriptive sectional study

LEE Ching Tzu, LI Chia-Ling

Introduction

Acute diarrhea is a common cause of foreign children's hospitalization aimed at controlling the severity of foreign acute diarrhea. Although the health care system of Taiwan, patients often seek medical consultation and hospitalized and hospitalized in children. Due to the continued poor fertility rate in Taiwan, caregivers often experience anxiety, while children are crying and not crying during hospitalization. Different expectations by oral rehydration therapy to shorten the time and reduce childhood diarrhea fasting primary caregivers anxiety.

Purpose/Methods

This is a retrospective, cross-sectional study, total included 97 participants of pediatric patients hospitalized in the teaching hospital located in Taiwan's Northern Region. The participants were divided into three groups, fasting group (35 children), rice soup (30 children), oral rehydration solutions (32 children). This

study analyzed the data by applying clinical direct intervention measures and the Situation Anxiety Inventory (State Anxiety Inventory, SAI) structured questionnaire for data collection, through descriptive statistics, independent t-test, single-factor analysis of variance, mixed-design two-way ANOVA.

Results

Based on the results: 1. The average age of children was 2.07 ± 0.82 years; boy was 43.1%; girl was 56.9%; the caregiver was mainly the mother (63.2%), aged 32.6 ± 3.9 years. 2. Hand therapy and sick children's age, gender, hospitalization days, number of stools, and have no difference in fever symptoms. 3. Caregiver situational anxiety scale scores are between 40-59 minutes, a moderate anxiety, anxiety fasting group is greater than the other two groups.

Conclusions

This present findings indicate that the anxiety levels to the major caregivers were influenced by the various oral rehydration therapies by sick children. Early initiation of oral rehydration therapy would reduce children's hunger, discomfort, caregivers' anxiety. It is hoped that this study will inform healthcare providers more targeted and helpful intervention planning, with the ultimate goal to enhanced better patient care and well-beings.

Contact: TZU ching

Mackay Memorial Hospital All Rights Reserved.

m418@mmh.org.tw

Nursing experience of a premature infant with respiratory distress syndrome

WU Yi-Jing, CHEN Heng-Hui

Introduction

The case in this article is a premature baby with respiratory distress who was admitted to the intensive care unit for observation and treatment immediately after birth. This case is the first child of the parents and has never cared for a premature baby. The case was born at the peak of the COVID-19 epidemic, and the case was added. Parents' many psychological pressures and burdens on care give rise to motivation for discussion.

Purpose/Methods

Use systemic physical assessment and family function assessment to collect relevant data; use breathing apparatus to help improve breathing effort and hypoxemia; premature labor cannot coordinate sucking and swallowing, first give oral gastric tube or empty needle to feed and rest in time. Gradually increase the amount of milk fed by mouth after stable; staying in the intensive care unit, resulting in early separation of parents and children. Application of kangaroo care can maintain stable vital signs, improve parent-child relationship, reduce the pressure and anxiety of parents of premature infants, and help parents adapt to the role of caregiver.

Results

After removing the ventilator and using oxygen, the case has no breathing effort, and the blood oxygen can maintain more than 90%. The other case is a premature baby. The oral gastric tube or empty needle is given and rested in good time. Increase the

amount of milk feeding; the case has been admitted to the intensive care unit, which has blocked the establishment of parent-child relationship. The application of kangaroo care increases the establishment of parent-child relationship. Parents are also encouraged to learn nursing skills so that parents can learn about the care skills of premature babies as soon as possible.

Conclusions

During this care period, the author used the professional team to assist the case and parents with continuous and individual care measures, and revised the care measures in accordance with the nursing evaluation in a timely manner. This is the same as the spirit of HPH child and maternal health care.

Contact: WU YI-JING

jillwu1125@gmail.com

Project to decrease the incidence of falls in hospitalized children

CHOU Chun Yun, LIU Yu-Ying

Introduction

Background: Falls are common accidental incidents in medical facilities and therefore an important safety performance indicator. There were a total of 3 incidents of falls in our ward in 2019, with an incidence rate of 0.06%. The reasons were 1) lack of universal guidance in preventing falls when a child was admitted; 2) lack of instruction of using assistive devices; 3) lack of family awareness; 4) families not having read the content in our brochure for preventing falls; and 5) inappropriate timing for fall prevention instruction. Objective: Decrease the incidence of falls in hospitalized children from 0.06% to 0.04%.

Purpose/Methods

We produced a poster called "3 Yes 3 No to prevent falls" for promoting awareness. We also designed illustration cards as instruction of use for assistive devices. We produced a video on how to use the hospital bed rails with a QR code. We have also reformed the nursing instruction process for preventing in-hospital falls.

Results

The incidence of falls in hospitalized children have decreased from 0.06% to 0.03%.

Conclusions

The posters, illustration cards, video, and renewed design of nursing routine have increased the families' understanding and awareness of in-hospital falls, thus decreasing the incidence of falls in children.

Contact: CHOU Chun Yun

Taiwan University Hospital, 100 Taipei,

020976@ntuh.gov.tw

The Impact of Nutrition Education Intervention on Children's Knowledge, Behavior and Attitude to Sweetened Beverages

TIEN Wan-Jung, LING Yuen-Yuen, HUANG Kuei-Ying

Introduction

The World Health Organization (WHO) recommends that the daily sugar intake should be less than 10% of total calories. In Taiwan, up to 91.7% of elementary school students drink sweetened beverage at least once a week. Excessive sugar intake will cause dental problems and obesity, which will affect learning ability and increase the risk of chronic diseases. We analyze the impact on elementary school students' knowledge, behavior and attitude after our intervention of nutrition education and hands-on courses.

Purpose/Methods

A partnership between a medical center in Taipei and an elementary school. Screened overweight and obese students to participate in the course named : Say no to Sugary Drinks. Nutritionist explained the difference between carbohydrates. Taught students using sugar meter to measure the sweetness degree of beverages and classification of sweetened beverages by traffic lights. Compare the different feelings of drinking juice versus water after exercise. Questionnaires were used to assess the improvement of students' knowledge, attitudes and behaviors about sweetened beverage.

Results

22 students joined the course (boy:17,girl:5), average 9.7±1.5 years. The questionnaires were all completed. Analysis results show that: [KNOWLEDGE] students can distinguish between carbohydrates and sugar that should be eaten or not, and learn traffic lights of drinks. [ATTITUDE] students are more confident in rejecting sweetened beverage. [BEHAVIOR] The proportion of students drinking 1500 c.c. of water per day increased to 50%. The rate of students who drink sweetened beverages < 2 times a week has increased from 56.5% to 63.6%.

Conclusions

After nutrition education, students' knowledge, behavior and attitude about rejecting sweetened beverage have improved. However, the number of samples involved in this nutrition intervention is small. More studies will be needed to confirm if it helps in the future. The results show that after practical operations and games, students can make better choices when facing sweetened beverage and willing to increase water intake, and even practical application in daily life.

Contact: TIEN Wan-Jung
amy10903@hotmail.com

Reducing the anxiety of preschool children during wound dressing change.

CHU Ching-Lan, WONG Su-Wei, LIU Yu-Ying

Introduction

Background: In our comprehensive pediatric surgery ward, children usually undergo dressing change and wound care every three days after operation. In our clinical experience, during wound care, preschool children tend to exhibit higher resistance and anxiety compared to children of other age groups. Objective: To decrease the anxiety of preschool children during wound dressing change.

Purpose/Methods

We made a video on children changing dressing "Shower time for the wound!" We also designed a workflow for pediatric wound dressing change and a system for children to collect reward points. We also created an educational course on pediatric wound dressing change.

Results

The anxiety during pediatric wound dressing change from November 2019 to February 2020 by Chotta Bheem-Chutki Scale decreased from 3.2 to 2.4 (25%). The anxiety from March 2020 to July 2020 remained at an average of 2.2.

Conclusions

Implementation of these program has successfully reduced anxiety level in preschool children during wound dressing change. We have included the workflow and reward point system into our ward routine. We have also promoted our video on the educational platform of the hospital to further aid pediatric wound dressing change in other pediatric wards.

Contact: CHU Ching-Lan
National Taiwan University Hospital
100 Taipei, 021160@ntuh.gov.tw

Preliminary Effectiveness of Using animated storybooks and interactive games on the wash hands among children 1-5 years old and their families

KUO Jie-Shin, HSIEH Li-Hua, CHANG Ya-Ting, HUANG Yi-Chun, HO Hsuan TSAI, Yi-Fan

Introduction

Our unit is a pediatric general ward of a regional hospital in Taipei, Taiwan. According to a survey conducted by Taiwan Centers for Disease Control (CDC) in 2019, children with diarrhea, enterovirus and influenza are in serious condition. Hand washing is the most effective way to prevent the spread of the disease.

We hope to increase the parent-child interaction through artificial intelligence animation improving children's and family's awareness and satisfaction with hand washing.

Purpose/Methods

The study period is from June 2019 to December 2020. The methods are as follows: (1) Use corrugated board as the base to make story books using favorite cartoon characters that children 1-5 years old love. (2) Medical staffs use storybooks to interact with children and family members through therapeutic games, and teaching children about when to wash your hands and using 7 steps to wash hands. (3) The storybooks combine QR code to connect the game with hand washing video.

Results

A total of 43 children aged 1-5 years were collected. After intervention, the awareness of hand washing was increased from 64.1% to 93%, and the hand washing compliance rate of children and their families was increased from 76.92% to 94.48%. Children and their families' satisfaction increased from 86% to 100%. According to our findings, children and their families can achieve effective and correct hand washing.

Conclusions

Nursing staff through the storybooks games combined with QR code image interaction, and using therapeutic games to interact with children and family members, significantly improving children and their families' hand-washing cognitive compliance rate and satisfaction, nursing-patient communication relation and clinical care quality. Our strategies have the value of promoting health promotion of children and their families centered.

Contact: TSAI YI-FAN

Taipei City Hospital, Young Ming Branch
b1717@tpech.gov.tw

The Effectiveness of the Visual-Motor Integration Group in Children with Specific Developmental Disorder of Motor Function

CHEN Yi-Chun

Introduction

Visual-motor integration is an integral component of many adaptive behaviors and has been linked to school readiness. This study was to explore the effectiveness of a visual-motor integration group for children with specific developmental disorder of motor function in grades 1 to 3 in primary schools.

Purpose/Methods

A total of six children participated in the visual-motor integration group. A total of five weeks of the group was held once a week for one hour and it was led by an occupational therapist and a physical therapist. The first week mainly focused on drawing their introduction card. From the second to fifth weeks, we trained their visual-motor integration through both static and dynamic activities. We used a standardized assessment tool, Beery VMI to measure children's visual-motor integration.

Results

According to the results of the Beery-Buktenica Developmental Test of Visual-Motor Integration (Beery VMI), five of six children got higher scores on the main test of visual-motor integration test. On the subtest of visual perception, four of the children got higher scores, and one child got the same score. On the subtest of motor coordination, four of the children got higher scores.

Conclusions

Visual-Motor Integration Group had a certain amount of help for children's visual-motor integration. However, this study only had five weeks which was too short to have a significant effect. In addition, parent education is also a crucial part to help children with their visual-motor integration.

Contact: LU Huei-Lan

Jiannan Psychiatric Center, MOHW
 71742 Tainan, 14404@mail.cnpc.gov.tw

Knowledge and Attitudes towards Myopia for Parents of Children in Taiwan – Results of the 2017 National Health Interview Survey

HUANG Pei-Lin, HSIEH Chia-Min, HSU Chih-Fen, SHIU Pei-Yuan, CHANG Hsing-Yi, LIN Yu-Hsuan

Introduction

The prevalence of myopia among schoolchildren in Taiwan was documented to be high and a steady increasing trend was observed from 1983 through 2017. Activities done at short working distance and time spent on near-work are the major risk factors of developing myopia. Parental knowledge and attitudes were the key agent for prevention of childhood myopia. This study aims to assess parental knowledge and attitudes toward myopia of children in Taiwan.

Purpose/Methods

We used data from the 2017 National Health Interview Survey, which was a population-based cross-sectional survey. Structured questionnaire and computer assisted personal interview with the parents (or main caregivers in absence of parents) of the sampled children aged 2 to 11 were applied to collect the data. We used cross tabulations to understand the proportions of parents who know myopia is a disease, the association between early developed myopia and rapid progression, and the links between high myopia and blindness.

Results

A total of 2,146 respondents completed the questionnaire interview. The results showed less than half (44.7%) of the parents understood that myopia is a disease. Only two thirds of the parents were aware of the association between early developed myopia and rapid progression, and high myopia may lead to blindness. The proportions were 68.3% and 67.5% respectively. However, 84.5% of the parents usually or always remind their child about the time and distance of short-work.

Conclusions

Data from the national survey in Taiwan revealed the insufficiency in knowledge of parents to myopia. Given the impacts that parental knowledge and attitudes could have on children's behavior and vision health, it is thus essential to attract more public attentions on parent's health literacy of myopia.

Contact: HUANG PeiLin

Health Promotion Administration, Ministry of Health and Welfare
403302 Taichung, pl1001@hpa.gov.tw

Effectiveness of group rehabilitation exercises on Improving the psychological well-being of children hospitalized for cancer

LIU Hsiu-Mei

Introduction

Chemical drugs are common treatments for children with cancer. Because of the side effects of drugs and effects of cancer, children going through cancer treatment are long-term bedridden and lack physical activities, and their opportunities to interact with peers are also reduced. Consequently, their daily life functions and psychological/social well-being are compromised. Group rehabilitation exercise may serve as an early intervention for children with cancer to improve their psychological well-being and quality of life.

Purpose/Methods

We design a rehabilitation exercise targeting children hospitalized for cancer. The exercise consisted of (1) movements of large joints such as shoulders, elbows, hips and knees; (2) movements of small joints such as fingers, wrists, and toes; and (3) muscle stretching. At 10:00 a.m. from Monday to Friday, children with cancer were invited through hospital broadcast system and individual invitations to engage in a 30-min group rehabilitation exercise led by rehabilitation therapists and nurses in the ward corridors.

Results

From July to December of 2020, the participation rate of children hospitalized for cancer reached 70%, totaling 452 times of participation. The distress thermometer (DT) was used to assess the emotional distress of children with cancer after the intervention; the higher the score, the higher the level of distress. On the day of hospital admission, 92% of the children who participated in the rehabilitation exercise received a DT > 5, and the percentage dropped to 21.7% after the intervention.

Conclusions

Children who engaged in the rehabilitation exercise provided the following feedback in the present study interview: they were happy to see other peers; their appetite increased after the exercise; and their self-perceived pain was ameliorated. According to the results, the group rehabilitation exercise helped reduce children's negative emotions elicited by their hospitalization and treatment for cancer, increased their interaction with peers, and thereby enhanced the psychological well-being of children with cancer.

Contact: LIU Hsiu-Mei

MacKay Children's Hospital
106 TAIPEI, tammy.6062@mmh.org.tw

Association between Utilization of Emergency Psychiatric Medical Services and Suicide among Adolescents in Taiwan

LAI Chi-Hsiu, WANG Chang-Ru, LI Fang-Yi

Introduction

Although there are abundant studies regarding the utilization of psychiatric services mainly in adults and the elderly population, comparative studies of long-term trends of adolescents are still relatively limited. This study attempts to investigate the utilization of psychiatric services for adolescents and the changes in the trend of the utilization in Taiwan.

Purpose/Methods

This study adopted the official health statistic from the Department of Statistics in the Ministry of Health and Welfare, analyzing Taiwan's National Health Insurance Research Database (NHIRD), and further studied the utilization trend of mental health care among adolescents (age from 10 to 24). The study population was segregated into three age subgroups for further respective analyses. All statistical analyses were made in Microsoft Excel 2010 software and SPSS software.

Results

Among adolescents from 10 to 24 years of age, the utilization of emergency psychiatric medical services increased, and the number of males has been higher than that in females ($p < 0.005$). Adolescent's suicide rate decreased except in 1999, while a downward trend is revealed in male teenagers ($p < 0.05$). Further, explore the correlation between the increase in the rate of adolescent emergency psychiatric medical services and the rate of suicide, the p-values are all < 0.05 , which are statistically significant.

Conclusions

In Taiwan, the utilization of psychiatric services in adolescents has grown sharply, and the recent utilization growth rate of males was significantly greater than that of females. In terms of standardized clinic visiting rates, the highest utilization rate of psychiatric service is noted and the growth trend is obvious. Suicide is the second-leading cause of death for 15- to 24-year-olds in 2017. It shows the severity of deliberate suicide among adolescents

Contact: LAI Chi-Hsiu

National Yang Ming Chiao Tung University Hospital
11209@ymuh.ym.edu.tw

Holistic Health Care for Adolescents

SU Chia-Yu, HUANG Ya-Wen, CHIOU Kuan-Hua, HSU Hung-Yi

Introduction

The hospital offers teenager-friendly outpatient services, where comprehensive health assessment and referral are provided. Citing the holistic care for adolescent suicides as an example, the hospital provides them with holistic care, hoping to improve their access to adequate and friendly medical resources.

Purpose/Methods

With the team led by the department of pediatrics, family medicine department, the obstetrics and gynecology department, the psychosomatic medicine division, social workers, psychologists, nurses, dietitians, case managers. formulates an "adolescent-friendly outpatient care process," in which doctors find that a teenager has care needs at the clinic, they refer the case to social workers, carry out the first needs assessment in the "adolescent consultation room" in the outpatient area, with the evaluation covering the body, mind and spirit.

Results

Since 2015, youth-friendly outpatient services, with the number of cases admitted annually on the rise. According to analysis, reasons for seeking youth-friendly outpatient services were romantic relationship issues at 18%, followed by out-of-wedlock pregnancy at 15%, poor family relationships at 14%, suicide at 13%, pressure of schoolwork at 13%, school bullying at 11%, smoking cessation at 6%, strained relationships with teachers at 5%, indicating the extensive demand for adolescent-friendly outpatient care.

Conclusions

The youth-friendly outpatient service can help them face difficulties in their growth stage. As the demand for medical resources intervention is high, medical care is extended to the campus and linked with the community so that the medical resources can be shared to lead to healthy condition in teenagers and pursue the youth-friendly holistic medical care.

Contact: HUANG Ya-Wen

Tungs' Taichung MetroHarbor Hospital
win568661@gmail.com

Use of health awareness to intervene in the effectiveness of betel nut prevention education on campus-take a middle school as an example

KUO Hsin Yi

Introduction

Teen first betel nut chewing source for family and friends, mostly because of curiosity and chewing betel nut; even junior high school students tried nearly 6 percent for the first time in chewing betel nut is before the age of 11. In order to raise

children's and youth's awareness of the health hazards of betel nut, betel nut prevention education should start early, and hope to take root from childhood to prevent children and adolescents from chewing betel.

Purpose/Methods

The object of implementation is a school or Penang education for middle school students. Conduct keynote speeches, video teaching, online Q&A discussions, and pre- and post-course tests, and finally conduct a satisfaction survey after the course.

Results

Day of class, the students the spirit of times no sleep, chat or phone slip, the whole process is very warm in class, students are encouraged to express their views and thoughts on betel nut hazards and giving positive feedback. The number of participants was 70, and the attendance rate was 100%. The post-study test was conducted after the lecture. The pre-test was 86 points; the post-test was 98.5 points. The overall course satisfaction was 92%.

Conclusions

Through this betel nut prevention education, students' knowledge and attitudes have indeed improved significantly; students receive betel nut prevention education and practical teaching through training courses, and they can develop professional attitudes and values of betel nut health hazard prevention. Let us be more active in implementing the education of betel nut health hazards prevention and control in schools rather than confined to communities or medical institutions.

Contact: KUO Hsin Yi

Tungs' Taichung MetroHarbor Hospital
435 Taichung City, sii992003@yahoo.com.tw

A Probe into the Issues of Adolescent Suicide

HUANG Yi-Ling

Introduction

According to statistics from Taiwan's Ministry of Health and Welfare in 2019, the top three causes of death between the ages of 15-24 are: accidents, deliberate self-harm (suicide), and cancer. Among them, deliberate self-harm has ranked the second place for consecutive four years at this age group.

Purpose/Methods

This study uses descriptive statistical methods. All data on suicide cases in Show Chwan Memorial Hospital from 2016-2018 were collected. Suicidal behaviors were compiled, and the proportion of suicide population aged 15-24 years in the total population was calculated. The causes of suicide were further analyzed, and relevant countermeasures were proposed.

Results

A total 219 cases of suicide admitted to the hospital in 2016, 14 aged 15-24 years old, with a rate of 6.4%. A total 180 cases of suicide admitted to the hospital in 2017, 17 aged between 15-24, with a rate of 9.4%. There were 179 hospital admissions and 31 suicides at the age of 15-24 in 2018, with a rate of 17.3%. The top five causes of suicide are: depression tendency, emotional

problems, family members problems, school adaptation problems, and work problems.

Conclusions

Statistics from our hospital in three years showed that there is indeed an increasing trend of suicide among those aged 15-24 years old. The causes of suicide are coincided with Erikson's Stages of Psychosocial Development theory. It is exactly the period of adolescence and young adulthood. It is also the problems encountered in the development of this age group. It is recommended to provide multiple social services to help avoid irreparable regrets.

Comments

The results show that, statistics from our hospital in three years showed that there is indeed an increasing trend of suicide among those aged 15-24 years old.

Contact: CHIA WEN Lai

Show Chwan Memorial Hospital

CHANGHUA, chd7203270@hotmail.com

The Top Ten Causes of Outpatient Services for young people in one medical center

JAN Chyi-Feng

Introduction

The objective of this study was to explore the top ten causes of outpatient visits for young people from one medical center in Taiwan.

Purpose/Methods

Using a cross-sectional study design from one Medical center from northern Taiwan in 2020. Outpatients aged 10-24 year-old in 2020 were recruited for data analysis. By using ICD-10 diagnosis, the top ten causes of young people who visited the medical center in 2020 were retrieved. We would like to delineate the difference by gender and three age groups including 10-14, 15-19, and 20-24 years, respectively. The departments that got involved in taking care of these patients were also analyzed.

Results

A total of 58402 young people (men 61.4%) were enrolled for data analysis in 2020. The main findings showed: In 2020, the top ten outpatient diagnoses for adolescents aged 10-24 was general health check (17.4%), Attention Deficit Hyperactivity Disorder (15.0%), vasomotor and Allergic rhinitis (14.4%), disorders of refraction and accommodation (9.8%), autistic disorder (9.8%), epilepsy and recurrent seizures (9.0%), atopic dermatitis (6.3%), conjunctivitis (6.2%), congenital septal abnormalities (6.2%), and dermatitis (6.0%). Interestingly, males were more predominant at outpatient visits in this medical center. The sex ratio (male to female) is above 1 by each diagnosis overall. Among them, attention deficit hyperactivity disorder and autistic disorder had sex ratio higher than 3. The main departments providing services for these young people were Pediatric Psychiatrist, Pediatrician, Family Medicine, Dermatology, Ophthalmology, Otorhinolaryngology, and Pediatric Neurology, etc.

Conclusions

Males had higher outpatients' services than females among young people in the tertiary medical center. A multidisciplinary team work force is mandatory for the young people.

Contact: JAN CHYI FENG

National Taiwan University Hospital

10002 Taipei, jcf036@ntu.edu.tw

Case Management Model Reduced the Effect of Postpartum Depression During the Fourth Trimester in a Regional Hospital

YEH Ju Yen

Introduction

Women experience role transition and physical changes, which effect their emotions. Appropriate supportive care and showing concern help to reduce negative emotions.

Purpose/Methods

Investigate the effect of case management model on reducing the occurrence of postpartum depression and predict important factors. This study recruited 100 postpartum women in a Regional Hospital; we applied the Chinese version of Edinburgh Postnatal Depression Scale and data were collected on the third day and sixth weeks postpartum. In addition, the investigator provided breastfeeding, newborn care skill, and psychosocial support during the telephone interview.

Results

We found high school education level, over the age of 30 or have no intention to pregnant are less stress-resistant. The items with the highest average scores in the scale were "I have blamed myself unnecessarily when things went wrong" and "I have been anxious or worried for no good reason". Improvement of anxiety levels during the fourth trimester were found after ten weeks follow up.

Conclusions

We wishes to achieve improve mental health, maintaining normal family life; helping mothers to overcome the fourth trimester well.

Contact: YEH Ju Yen

Tungs' Taichung MetroHarbor Hospital

43503 Taichung, d1087052@yahoo.com.tw

Implementation Result of Positive Labor Experience

LIN Hui-Min, CHEN Mei-Feng, HSU Hui-Ping, TSENG Meng-Chuan, CHANG Hsin-Yi, CHANG Mei-Fang, CHUANG Shu-Ting, CHIEN Son-Hsin

Introduction

Labor is a unique experience in women's life. A positive and satisfying pregnancy experience is important in the development of the role of mother (Chen, Guo, 2015). According to our hospital's survey, the satisfaction of the labor support was only 40.5%. In order to increase the satisfaction of maternal and child care, we start improving project.

Purpose/Methods

Ishikawa Diagram analysis: 1. The staff did not know how to perform labor support. 2. The mother did not receive the information of labor support. 3. The paternity could not exhibit the function of Labor support. And that is the main problem need to be improved. The improved project steps are as follows: 1. Establish a working team. 2. Planning and executing education of labor support for training staff. 3. Hold antenatal education about labor support. 4. Review and improve.

Results

From January to March 2021, we count that the labor support satisfaction rate reach up to 93.6%. The information supports that increase 66.0% has the highest growth rate.

Conclusions

This project shows that increasing labor support during pregnancy care will not only enable case to have positive labor experience, but also improve the quality of pregnancy care. Medical staff can also obtain work achievements from it and increase their willingness to stay.

Contact: HSU HUI-PING

Nursing Department
427213 Taichung City, icshsu617@gmail.com

Nursing experience during pregnancy in caring for an elderly woman to give birth to twins

TUNG Yu-Hua

Introduction

The case in this article is a 46-year-old woman's experience in nursing care for twins during pregnancy. Because this baby is not easy to get, she experienced many discomforts during pregnancy, worried about premature birth and the uncertainty of fetal health, which caused physical and mental stress, which led to motivation for discussion.

Purpose/Methods

During the nursing period from August 1 to November 10, 2020, a holistic assessment was conducted through observation,

meeting, listening, and physical assessment. The health problems were summarized as: potentially dangerous mother/fetal interference, Improve preparation and anxiety during childbirth; through cross-team medical care, individual and continuous nursing measures are provided based on the condition and evidence of the disease. In addition to nursing during routine check-ups, it also provides monthly telephone interviews and video interactions. Real-time recording to improve prenatal life style, use APP and QR Code health education videos to effectively improve pregnancy and childbirth knowledge; in terms of preterm birth prevention, teach self-judgment of preterm birth signs and encourage attention to fetal movement; it is recommended that the case take daily blood pressure and record changes; Relieve anxiety by listening to music; encourage the use of abdominal lift during the third trimester to relieve the discomfort of backaches and backaches.

Results

Through individual and continuous nursing measures, improve the knowledge of pregnancy and childbirth; use empathy, listen and give positive encouragement and provide correct information to evaluate the type of music the case likes, and it is recommended to listen to crystal music to reduce anxiety, To help relax the mood, so that the case can smoothly pass the pregnancy and give birth safely.

Conclusions

Based on the results of empirical literature collation, the case manager establishes a good nursing relationship with the case, provides continuous and individual care, and then understands the needs of the case and provides appropriate nursing measures. However, in addition to the pressure during pregnancy, the pressure of care after childbirth comes one after another, and it is more difficult and requires more support. This is the same as the spirit of HPH child and maternal health care.

Contact: TUNG Yu-Hua

Dalin Tzu Chi Hospital, Buddhist Tzu Chi Medical Foundation
amydoong@gmail.com

Health Promotion Activities in Community for Healthy Childbirth of Mothers Who Present to Boramae Medical Center

HONG Jiyeong

Introduction

Mothers who are hospitalized for delivery require a specific and detailed explanation about the tests and treatments that are performed from admission to discharge. There are various educational materials regarding the delivery. However, their utilization is poor and modification is necessary based on the mothers' needs. In addition, hospitalization rate of high-risk mothers has also increased and emotional support for them is being neglected.

Purpose/Methods

1) Conducted a survey of mothers to investigate educational needs concerning the delivery 2) Discussed and implemented the active use of explanatory videos sent to mothers by sms 3) Designed an information leaflet for prospective fathers 4)

Reconstructed educational materials on labor in the form of leaflets. 5) Provided mothers with a photo card to celebrate their first meeting with their babies. 6) Established a mini library for high-risk mothers

Results

1) Sending rate of explanatory videos via sms increased and a significant number of participants responded favorably in a satisfaction survey. 2) Emotional support for high-risk mothers has been provided as they are able to spend their time reading books. 3) The mothers responded favorably to the photo card. 4) Gained trust from prospective parents through successful establishment of materials.

Conclusions

This activity led to understanding of both the mothers' & prospective fathers' health needs and successful development of customized materials to meet their needs.

Contact: HONG JIYEONG

SMG-SNU Boramae Medical Center

nabal85@naver.com

Efficacy and Safety of Integrated Traditional Chinese Medicine and Western Medicine for infertility women with Diminished Ovarian Reserve- building a nomogram to predict pregnancy rate

CHANG Chiung-Hung, WANG Shu-Chiu, TSAI Liang-Miin, SU Pei-Fang, HSU Yuan-Man

Introduction

Taiwan's fertility rate is the lowest in the world, the incidence of infertility is 10-15%. In addition, the productivity of women with infertility who receive assisted reproductive technology (ART) treatment for the pregnancy rate is 25.8% in 2019 in Taiwan. A woman's fertility depends on her ovarian reserve that plays a vital role in getting pregnant. The present study was designed to evaluate the effects of Traditional Chinese medicine (TCM) therapy, and comparison of therapies combining TCM and IVF used for the treatment of female infertility with Diminished ovarian reserve (DOR).

Purpose/Methods

This study was approved by the Institutional Review Board (IRB) of the Show Chwan Medical Foundation (IRB No. 1090501). This retrospective study collects data from female infertility patients' records of the clinics in Tainan Municipal Hospital in 2017-2019. Inclusion criteria: female infertility patients for ≥ 1 year with AMH < 2.0 ng/ml. Data analyses included descriptive statistics, inferential statistics. We developed a nomogram for predicting pregnancy rate follow-up that was analyzed using generalized estimating equations (GEE) models with fixed random-effects models.

Results

A total of 43 patients receive therapies combining TCM and IVF (Mix group) and 252 patients received TCM treatment (only TCM group). The pregnancy rate in the Mix group and TCM group was 52.94% and 29.76%, respectively ($p=0.002$). When the increased patient age was associated with a decreased pregnancy rate and type mix was associated with an increased pregnancy rate. The presence of Age (OR=0.886, 95% CI 0.822 to 0.954, $p=0.001$) and type mix (OR=3.773, 95% CI 1.763 to 8.075, $p<0.001$) were the strongest determinant factor of the pregnancy rate in our model. The nomogram showed an area under the curve (AUC) of 0.73 and was well-calibrated. Furthermore, there were no adverse events.

Conclusions

Our data also support the possible use of an Integrated combination of Chinese medicine and western medicine as a therapeutic strategy that can improve the pregnancy rate in infertility patients.

Contact: CHANG Chiung-Hung

Tainan Municipal Hospital (Managed By Show Chwan Medical Care Corporation)

670 Tainan, changch99@gmail.com

Application of Team Resource Management for Quality Improvement of Maternal and Neonatal Care during Emergent (Category 1) Cesarean Section

CHEN Yi-Ju

Introduction

When a delivery requires an emergent Cesarean section, every second is very crucial, since any delay of time to delivery may lead to worsening outcomes. The most time consuming factors include inter-departmental contact and explanation, unclear inter-personal division of responsibilities, as well as transportation to the operation room. To eliminate these factors, we designed a novel code (9595 C/S) to aim to shorten decision to delivery time with team resource management (TRM) model.

Purpose/Methods

We collected data of decision to delivery time for cesarean section at a single tertiary center in Taipei. Our proposed strategies included (1) recognition of a single phrase for initiating emergent cesarean section (2) inter-departmental consensus of this novel code delivery location (3) establishment of standardized operation procedures and (4) simulations of emergency settings. After the new protocols were implemented, we assessed the time of decision to delivery and compared it to previous records.

Results

The novel TRM code and consensus had been implemented since November 2019. Comparing to previous data, the rate of fetal delivery within 30 minutes had improved from 50% to 100% after the new protocols were established. Also, the actual decision to delivery time had decreased from 38 minutes to 17.8 minutes. This code has been highly effective even up to April, 2021, where

the average decision to delivery time has remained at an average of 16 minutes.

Conclusions

This novel code (9595 C/S) for a consensus during a Category I emergent cesarean section between the delivery room, operation room, anesthesiology, and pediatrics is highly effective. During a situation of emergency, everyone is willing to help out to facilitate a safe delivery and we observed no incidence of a false call to deliver. However, we will still have to collect more data and monitor each time this protocol is initiated.

Contact: YI-JU Chen

yiju0217@yahoo.com.tw

Nursing experience of tocolysis in a case with pregnancy after infertility

KUO Weiwei

Introduction

This article describes the nursing experience of a previously infertile case who was pregnant with twins after receiving artificial reproductive technology, and was admitted for tocolysis due to preterm labor signs noted at 25 weeks of gestation.

Purpose/Methods

The nursing period is from March 12, 2020 to April 19, 2020. The author collected data through observation, listening, interviews, and clinical care, and used Gordon's eleven functional healthtypes for assessment.

Results

Three nursing problems included (1) bowel habit changes related to absolute bed rest, environmental changes and reduced activity during tocolysis, (2) discomfort related to absolute bed rest, limited activity, and side effects of tocolytic agents, and (3) anxiety and worries about preterm delivery, fetal health, and instability of tocolysis.

Conclusions

During nursing period, author provided measures to promote comfort, dietary education, and assisted in defecation with a bedpan. Regarding the anxiety and worries of preterm delivery and fetal health, the author kept company with the case with careful listening, built trust in the patient-nurse relationship, encouraged the case to express her feelings, and provided correct information from the gynecological and pediatric medical team to alleviate her anxiety.

Contact: KUO WEIWEI

Dalin Tzu Chi Hospital, Buddhist Tzu Chi Medical Foundation
sassyvivi@gmail.com

The impact of mental disease and consequence in pregnant women after preterm labor: A Population-Based Cohort Study

HSU Hua-Yin, TSENG Yuan-Tsung

Introduction

By most accounts, pregnant women with preterm are a population at risk for perinatal health and mental health problems. Families in Taiwan pay great attention to women who are giving birth. All these environmental and psychological stresses can lead to mental illness. We want to assess the risk between preterm and general pregnant women, which seems to be scarce in the literature. However, questionnaire-based literature observation as a measurement tool may not reflect the true situation of Taiwan as a whole. Clinical data between premature pregnant women may better represent the importance of this issue, requiring population-based longitudinal surveys.

Purpose/Methods

Using Taiwan's National Health Insurance Research Database were retrieved from a representative NHIRD cohort from January 2003 to December 2017, we identified 5981 Pregnant women with preterm and 124,393 Normal spontaneous delivery as the study cohort as the comparison cohort. Risk ratio analysis was used to compare the risks of mental disease between them.

Results

We evaluated mental and other healthy diseases risks between preterm and Normal spontaneous delivery. (Migraine [RR]: 1.22 ; 95% confidence interval [CI]:1.09-1.38), Back pain 1.23(1.12-1.37), manic syndrome 1.2(1.07-1.35), depression 1.28(1.07-1.52), sleep disorder 1.23(1.15-1.3), Dissociative disease 4.62(1.56-13.67), Alcoholism 1.51(0.91-2.5), Drug addiction 2.43(1.59-3.71), Drug poisoning 1.78(0.82-3.84), Solid-liquid poisoning 0.95(0.3-3.01), Suicide and self-injury 1.73(1.04-2.88), Environmental accident 1.25(1.03-1.5), Uncertain accident 1.04(0.62-1.74).

Conclusions

Maternal depression during pregnancy is an independent risk factor for premature delivery, but other illnesses, such as Drug addiction, Dissociative disease, and psychotic illness, may also predict adverse birth outcomes. Obviously, there are many influences to make further pregnancies outcome. Using your family and hospital professional support may be helpful in reducing the incidence of premature delivery.

Contact: TSENG Yuan-Tsung

Tainan Municipal Hospital, b891040733@yahoo.com.tw

The impact of endocrine and chronic diseases in pregnant women with preterm labor: a population-based cohort study

HSU Hua-Yin, TSENG Yuan-Tsung

Introduction

The evaluation of preterm labor isn't always known, but certain risk factors can increase the likelihood of going into labor early. Although most pregnant women go into labor at the 40-week mark, some women with endocrine and chronic diseases go to work a little earlier. This study examined to assess the characteristics and risks of preterm pregnant women with chronic diseases.

Purpose/Methods

Using Taiwan's National Health Insurance Research Database were retrieved from a representative NHIRD cohort from January 2003 to December 2017, we identified 5981 Pregnant women with preterm and 124,393 Normal spontaneous delivery as the study cohort as the comparison cohort. Risk ratio analysis was used to compare the risks of mental disease between them.

Results

The overall risk was significantly different in the two cohorts. hypertension[RR]: 4.61(4.17-5.09), Hyperlipidemia 2.46(2.2-2.76), Cirrhosis 1.76(0.76-4.05), Hyperthyroidism 1.28(1.12-1.46), Hypothyroidism 1.43(1.13-1.79), Thyroiditis 1.47(1.26-1.72), Alcoholic liver disease 1.98(0.46-8.45), HBV 1.23(1.06-1.43), Myocardial infarction 2.13(0.76-5.97), Peripheral vascular disease 1.89(1.45-2.45), diabetes 3.58(3.16-4.05), Severe kidney disease 2.95(2.44-3.56), Severe liver disease 1.27(1.11-1.46).

Conclusions

The overall evidence suggests that chronic disease patients can be a group particularly susceptible to preterm; however, the pathogenesis of chronic disease-related reproductive disorders still awaits clarification. An understanding of the pathophysiological mechanisms underlying the effects of health education on programming can provide new insights into therapeutic strategies for pregnant women.

Contact: TSENG Yuan-Tsung

Tainan Municipal Hospital, b891040733@yahoo.com.tw

Consideration of support for social difficult cases and labor evaluation in obstetrics and gynecology

HAGA Atsuko, KOMINE Masako, ENOMOTO Akemi, ITOU Jyoujyu, ICHIKAWA Kiyomi

Introduction

In recent years, Obstetrics and Gynecology have increased cases of social difficulties. There are many difficult cases on the back of the bright and happy image of "birth of a baby." Even at our

hospital, there are only a few cases with no risk out of 40-50 deliveries per month. In 2015, we examined the overall picture and social background of pregnant women at first visit. We report our efforts in obstetrics and gynecology for many social difficult cases.

Purpose/Methods

(Purpose) Analyzing the social background of pregnant women and summarizing their support activities, grasp the current situation and clarify future issues. (Methods) 1) For 828 pregnant women who first visited our hospital from January 1, to December 31, 2015, their pregnancy and delivery history, family background, growth history, pregnancy progress, and childcare status after delivery were tabulated and analyzed. 2) The number of access to electronic medical records by pregnant women at social high-risk was calculated and examined.

Results

High-risk cases with 3 or more social risks overlapped were 134 pregnant women, 16.2%. The proportion of high-risk pregnancies by age was as high as 91% for under the age of 19, 46% for 22-24, and as low as 9% for 30-34. The percentage rose again to 11% for 35-39 and 16% for 40 and over. The frequency of accessing the electronic medical records for "social high-risk cases" was about 1.3 times as high as that for "low-risk cases".

Conclusions

Social high-risk cases have many difficult problems. Therefore, it is important for medical staff to collect more detailed information, to have a common understanding of patients among staff, and to work closely with local institutions. It is imperative that the time and labor of health care workers be devoted, but the current medical fee system does not value such work. For this reason, it is necessary to inform the society of the problems of the current hospital.

Contact: KATSUYUKI Togashi

Saitama-kyoudou Hospital

k-togashi@mcp-saitama.or.jp

Antenatal care education improves breastfeeding practices

LEE Li-Chung, OU Hsiao-Tei, HUI Ping-Hsu, LIU Hui-Ling, LEE Min-Chun, TSENG Meng-Chuan, FAN CHIANG Yu-Chen, CHUANG Shu-Ting, CHIEN Sou-Hsin

Introduction

Research shows that now at an all time low fertility rate it is important for nursing staffs to increase women's pregnancy knowledge, emotional support, reducing uncertainty and worry. Since women rely on the resources provided by institutions, this can compensate their lack of living like before

Purpose/Methods

Using antenatal care education with the goal to improve postpartum mother and newborn care. To strengthen prenatal education, Using : 1. "Maternal Case Management Forms" to provide antenatal care based on where the mothers are in their pregnancy and provide a follow-up education. 2. Every month, a meeting for the parent and breastfeeding support group course

is held. The mother and family members are encouraged to come. 3. Every month, group health education is held to provide maternal breastfeeding education.

Results

The study lasted from January 2017 to June 2019. The results are 1. Based on their pregnancy week, individualized breastfeeding education and pregnancy related health education was provided. On average, 146 participated in the education. 2. The turnout for the parent meeting and breastfeeding support group courses were 97.72% and on average the 97.02% were satisfied with the course. 3. The group health education attended by the mothers and their family had a satisfaction rate of 89.2%.

Conclusions

After the one-on-one health education guidance and group courses, this increased the participant rate and satisfaction of the women. Pregnant women were less idle will waiting at the outpatient clinic. Additionally, it improved the patients' willingness to participate education in classrooms, which promoted self-efficacy. As a result, promotes better quality of health and life during their pregnancy

Contact: FANCHIANG Yu-Chen

Buddhist Tzu Chi Medical Foundation
df173536@tzuchi.com.tw

Construct and evaluate the effectiveness of individualized exercise model for pregnant women

LAI Shih-Ting, LIN Chen-Ju, LEE Ching-Fang, CHI Li-Kang, HUANG Yao-Chung

Introduction

Pregnant women tend to decrease exercise frequency and intensity after becoming pregnant. The physiological effects during pregnancy may leading to some symptoms distress. The American College of Obstetrics and Gynecology guidelines suggest that proper amount of regular exercise promotes the physical fitness and overall health of pregnant women. Few studies developed and evaluated the exercise prescription to relief pregnancy induce symptoms distress. We aimed to construct an effective, individualized exercise counseling model for pregnant woman.

Purpose/Methods

We recruited 101 healthy pregnant woman without medical or obstetric complications. The experimental group received an individual exercise prescription, 52 pregnant women. The control group received the prenatal visits, but no exercise prescription, 49 pregnant women. The exercise prescription would be individualized based on their perinatal and basic characteristics, gestational weight gain and symptom disturbance scale. Data will be collected after obstetrician face to face interview and an instrument. The post-test will be 4-6 weeks after intervention.

Results

The distress symptoms include mental distress, back or pelvic pain, nausea and vomiting, urine incontinence, fatigue, excessive gestational weight gain, insomnia, peripheral circulation and numbness. The exercise prescriptions items include frequency,

intensity, duration, type, progression and individual considerations. The effect of the exercise prescription intervention is waiting the return of posttest mail.

Conclusions

We developed exercise prescriptions of relief the pregnancy induces symptoms distress. The study results will be useful to counseling pregnant women to relief symptom distress and promoting exercise and an active lifestyle during pregnancy.

Contact: LAI Shih ting

namida1984@gmail.com

Utilizing Team Resource Management Simulation to Improve Maternal and Neonatal Care

WANG Shu-Chen, SHIU Shiau-Fen, TSAI Ya-Lun

Introduction

An incorrect clinical decision or treatment may lead to irreversible outcomes, especially in an emergency situation. To reduce the rate of adverse events, we utilized a team simulation model through team resource management as well as advanced simulation props to practice all types of real-life risks and scenarios. This way, we not only can enhance teamwork and communication but can also avoid recurrence of adverse events and enhance the ability of the medical staff to deal with emergency situations.

Purpose/Methods

In an emergency obstetrical or high-risk pregnancy situation, maternal and fetal lives are at risk. It is a test of teamwork and communication skills, observational skills, and clinical decision making skills for an inter-disciplinary medical team in an emergency setting. Starting from medical education, we designed high fidelity simulations in team resource management training to allow the team to participate in the entire process to learn clinical treatment, medical teamwork collaboration, and communication skills.

Results

The staff gave positive feedback after the simulation course training in 2020. Difficulty levels were quantified on a scale of 5 points. We observed a decrease in the average difficulty levels in all categories, in teamwork techniques (3 to 1.4 points) and communication skills (3.1 to 1.3 points), detection (2.87 to 1.8 points) and treatment skills (2.7 to 2 points). We also observed an improvement of satisfaction rate in team and personal performance rate (3.6 to 5 points).

Conclusions

We were able to apply the experience of seven simulation training courses per year to our clinical practice, improving effectiveness of teamwork between our obstetrics and pediatric staff. Furthermore, by enhancing the medical abilities and skills of our staff, we can improve both clinical care and patient safety.

Contact: WANG Shu-Chen

Cathay General Hospital, Taipei, TAIWAN
shujen@cgh.org.tw

Poster Session 17: Age-friendly health care

A study of medical social workers investing in spiritual care services of geriatric palliative care

LAI Shih-Chun, LIN Ciao-Ting

Introduction

Population aging is the starting point of international attention. According to data from the Taiwan Development Commission, one in every five people is an elderly person in 2026. The Psychosocial development theory of "life end and despair" is consistent with the discovery of the meaning of life in the process of aging. It is important for clinicians to invest in the spiritual companionship of patients with advanced age in receiving hospice services.

Purpose/Methods

Based on the analysis of the case records of hospital social workers who invested in peaceful joint care from 2016 to 2018, descriptive statistical analysis methods were used to summarize statistics on the four major care issues of social, psychological, spiritual and religious levels, and assisting in disease awareness.

Results

Among the 904 cases, the elderly population accounted for 61% of the total number of cases, and the number of spiritual and religious services accounted for the largest proportion (51.2%), followed by assisting with disease awareness (27.9%). Fourth, the spiritual and religious service sub-item is ranked in the top three with a review of life, a discussion of the meaning of life, and subsequent events.

Conclusions

According to the analysis of clinical work data, the proportion of elderly people in Anning County is higher than that of young and middle-aged ethnic groups, and there is a significant difference in the ratio of spiritual care services.

Comments

Under the global aging trend, the need for elderly care and medical care is bound to increase. According to the analysis of clinical data, the elderly people receive the most demand for spiritual care in the peaceful service. Whole-person care not only pays attention to the physical, psychological, and social, but also needs to see the importance of spiritual care.

Contact: CHIA WEN Lai

Show Chwan Memorial Hospital
CHANGHUA, chd7203270@hotmail.com

Spiritual Care Plan for the elderly - 'Blessed Time' Spiritual-Growth Groups

CHAN Chiky

Introduction

Due to the aging society in Taiwan cause many elderly problems. They refuse to interact with other people in their community and live alone in their apartment. The purpose of this plan is to enable the elderly to walk out from their apartment and have physical, emotion and spiritual care. Throughout the past 36 months of the spiritual growth groups hold in the Taipei Integrated Care Centre organized by Mackay Memorial Hospital and cooperated with the Taipei government, over 500 participants attend the spiritual growth group.

Purpose/Methods

The purpose of this plan is to provide a space for the elderly to take care of their spiritual need and increase the interaction of the elderly in the community. Throughout 36 months spiritual guidance by the Pastoral Care Counselor, the 65 year-old female volunteer and 80 year-old female volunteer, 15-20 participants attend the spiritual growth group every month. Ever month, they learn to exercise their body, draw and sing with the volunteers and share their feeling and though in certain topics guiding by the Pastoral Care Counselor.

Results

90% participants are willing to attend the spiritual growth group after each month. Over 100% participants said that this spiritual plan effectively increase the happiness and increase the belonging to their community.

Conclusions

Through the group interaction after 36-month spiritual plan, the elderly is ables to self care and awareness. Also, the spiritual group increase the willingness for the elderly to walk out from their apartments. The 65 year-old female volunteer and 80 year-old female volunteer are healthy aging model for the elderly.

Contact: CHAN Chik Yi

Mackay Memorial Hospital
25160 Taipei, chikyichan2004@gmail.com

Effects of a Frailty Care Program in Taiwan Age-friendly Hospital: Chest Hospital

LIAO Lin Yu, CHENG Hsiu-Rong

Introduction

Frail patients in hospitalized often with leads to an increase falls risk, illness recovery or admission is prolonged, disability, and repeated hospitalization. The incidence of frailty was higher in our hospital (pooled incidence rates, 64.5%). Hence, the main purpose was to evaluate the effects of frailty care program on incidence of falls and 14-day readmission rate among hospitalized elderly patients in Taiwan age-friendly hospital.

Purpose/Methods

A quasi-experimental design, purposive sampling, and a one-group pretest–posttest design. The frailty care program intervention include a frail integrated assessment, preparation before discharge assessment, a respiratory rehabilitation exercise and limb muscle training, nutrition screening and assessment, managing multiple medications, strengthening diabetes management, education and telephone follow-up. The study was conducted and compared difference from November 1, 2018 to November 30, 2019, with incidence of falls and 14-day readmission rate were assessed at baseline, at the 6-month and 1-year.

Results

The falls of incidence was 0.08% at baseline, 0.13% at 6-month and 0.07% at 1 year; the 14-day readmission rate was 2.70% at baseline, 1.33% at 6-month and 0.92% at 1 year.

Conclusions

Our study results that frailty care program across hospital on incidence of falls and 14-day readmission rate are beneficial, with incidence of falls observed increase, although only in 6-month. Upon further analysis, at the end of 6-month, lower-extremity muscle strength improvement was not significant compared with baseline ($P > .05$). Studies have shown that muscle strength is associated with increased risk for falls. Our suggested that the promotion of frailty care program should increase frequency of muscle strength training.

Contact: CHAO YANG Fu

Chest Hospital, Ministry of Health and Welfare
tn50276@ccd.mohw.gov.tw

Senior Friendly Service Map of a Community Hospital in Central Taiwan

YANG Meei-Horng, LIN Hung-Ru, HUA Ko Hsin

Introduction

Taiwan officially entered an era of an aged society in 2018, as the average life expectancy of people in Taiwan has reached 80 years old. In this study's hospital, senior patients account for 43% of the outpatient use rate. The purpose of this project is to make an inventory of the existing senior healthcare services in the entire hospital and draw the Senior Friendly Service Map.

Purpose/Methods

From May to July 2020, this study invited experts from 12 departments associated with senior friendly services and set up focus groups to collect data five times. The person in charge of this project analyzed the data for classification of themes.

Results

A total of 28 department supervisors participated in this project. The data analysis showed that the Senior Friendly Service Map includes 8 themes: (1) information intervention and communication; (2) risk assessment and health education; (3) high-quality care; (4) self-actualization; (5) healthcare benefits; (6) community resource application and service; (7) talent cultivation; and (8) friendly environment. The senior service

policy of the study's hospital is "Patient-friendly Wei Gong Memorial Hospital; Providing Warm Services; Guarding the Senior; Pursuing Longevity with Happiness."

Conclusions

Under the guidance of senior policy and strong support by the study's hospital, the senior service themes mainly focus on information-based intervention and communication, high-quality care, and friendly environment services. Other senior service themes still can be strengthened.

Comments

During the COVID-19 pandemic in 2020, the health promotion committee of the study's hospital made the best use of focus group meetings with social distancing to continue health promotion activities.

Contact: YANG Meei-Horng

National Taipei University of Nursing and Health Sciences/ Wei Gong Memorial H., celinayang2014@gmail.com

Constructing a diversified residential long-term care institution for senior citizens

YANG Shih-Chen, CHU I-Chen, CHEN Shu-Chuan, HUANG Yu-Hcia, LIN Kai-Mei

Introduction

Taiwan is expected to exceed 20% in 2026 and enter a super-aged society. The hospital implements the long-term care policy, establishes a one-stop service and establishes a "residential long-term care institution", hoping to be able to care for the elderly and disabled people to get a place where they can rest and rehabilitate, realize localized services and maintain the quality of life.

Purpose/Methods

1. Space planning: The institutional environment is spacious and beautiful, paying attention to safe movement; the room layout and meeting space are warm and comfortable, elegant and clean, and have privacy. 2. Facilities and equipment: 3D animation interactive system and muscle rehabilitation facilities to prevent residents from dementia, slow down aging and improve balance ability; pressure out of bed monitoring records the amount of bed rest activity and the distribution of body pressure. 3. Professional team: "backed by medical care" provides a care model that integrates long-term care, community medical care, and home medical care; "healthy, elderly, and happy life" is jointly created by a multi-professional medical care team and administrative system"; Professionally plan residents' activities and nutritious meals to improve the quality of friendly care for the elderly.

Results

The rate of accommodation in senior institutions increased from 69.02% to 75.04%. The establishment of residents' care quality indicators includes falls, unplanned weight changes, and nosocomial infection and pain monitoring; service staff quality indicators include handwashing compliance and accuracy, nasogastric tube feeding and other nursing technology audits and service satisfaction.

Conclusions

Combining local resources, serving the disadvantaged groups with long-term care in the region, providing comprehensive elderly care services, rebuilding the confidence and health of the elderly, and long-term care institutions play an extremely important role in elderly care.

Contact: YANG Shih Chen

Taipei City Hospital Zhongxing Branch
103 Taipei, B1713@tpech.gov.tw

A regional hospital promotes the effectiveness of case-centered medical home care

YAO Wen-Chen, TSAI Hin-Chu, PENG Chun-Hui, LIN Ching-Feng, LUO Jiing-Chyuan, LI Ling-May

Introduction

In response to the rapid aging of Taiwan's population, the hospital participated in the Medical Home Integrated Care Plan of the Ministry of Health and Welfare in October 2016, and began to promote case-centered to provide medical home care for the elderly and the disabled. Provide related resources and referral services. Let people get medical care at home, reduce the inconvenience of going to the hospital, and obtain related resources.

Purpose/Methods

The hospital expands the medical home team through home care units, including physicians and nursing, nutrition, rehabilitation, social workers, pharmacists and other professionals. It regularly discusses and revises evaluation standards and service processes, establishes an information management system, and provide integrated and continuous medical home care of case-centered.

Results

From January to December 2020, Total of 275 cases. The average age was 78.2 years. The home care cases including 23 general medical, 243 multiple medical needs, and 9 hospice. The multiple medical needs accounted for the most 88.4%. The referral services of 119 people, including 3% of home services, 21% of assistive devices and supplies, 70% of medical care, 4% of transportation and respite services, 2% of long-term care institutions, and overall service satisfaction was 93.6%.

Conclusions

In Taiwan, with the continuous increase of the elderly and disabled population and the changes in the social and family structure, home care has been unable to meet the needs of the people. Case-centered medical home care can reduce the inconvenience of medical treatment and waste of medical resources. Let cases get integrated medical care and long-term resource links.

Contact: LIN Ching-feng

Keelung Hospital Ministry of Health and Welfare
chingfeng01@gmail.com

A Reablement Program for Inpatients Qualified for Long-term Care

CHEN Wen-Chieh, PAI Tzu-Chen, LEE Hsien-Ju, HSIAO Yu-Wen, WEI Shu-Yi, HUANG Ming-Ren, YEN Chia-Chi

Introduction

As Taiwan officially entered the stage of an aged society in March 2018, the Ministry of Health and Welfare has launched various long-term care programs, including the reablement program that assists inpatients in regaining their ability to live independently through cross-functional cooperation.

Purpose/Methods

The hospital participated in the 2019 Reablement Pilot Program launched by the Ministry of Health and Welfare and set up a task force to provide such service for qualified inpatients. The program spanned three stages: planning (communication meeting and appointment with superintendent, discharge simulation, promotional video, and rehabilitation kit), execution (execution policy, improvement plan, and program monitoring), and evaluation (data synthesis, result evaluation, and review and improvement).

Results

After implementing the program, the medical professionals' awareness of reablement increased from 86.7% to 93%, and patients and their families' need for long-term care increased from 64.3% to 87.1%. From March to December 2019, a total of 121 patients enrolled in the program, which reached the target number of 120 patients set by the Ministry of Health and Welfare for regional hospitals.

Conclusions

The program provided patients an opportunity for reablement, allowing them to receive reablement service at home and saving them from commuting.

Contact: HUANG hsin-jou

Kaohsiung Municipal Min-Sheng Hospital
hsinjou1224@gmail.com

Study on adverse reactions of Type A drugs in the elderly in a teaching hospital in northern Taiwan

CHANG-TSAI Ting-Yu, LIN Ching-Feng, LUO Jiing-Chyuan, LI Ling-May

Introduction

Taiwanese people over 65 account for 16.07% of the total population. According to the WHO definition, Taiwan is an "aged society". The elderly have weaker physiological functions and suffer more chronic diseases, which may cause pharmacokinetics to be different from those of young people, and there are problems with multiple medications. Type A adverse reactions

caused by drugs are more likely to occur than young people. It will increase medical waste or increase the patient's risk of illness.

Purpose/Methods

This study is based on a case study of type A adverse drug reactions in elderly people visiting our hospital during the period from 2018 to 2020 in our hospital (Exclude non-ADR, patients who report allergies in the past, and adverse reactions caused by TB drugs). Analyze which drugs are the most common Type A adverse reactions and symptoms in the elderly?

Results

The study sorted out a total of 272 ADR cases, of which the elderly's ADR accounted for 40.4% (110 cases), including 4 severe ADRs. Among the elderly's ADRs, Type A accounted for 46.3%. Further analysis revealed that the top three were Cardiovascular drugs (12 cases), psychiatric-related drugs (9 cases), and blood circulation drugs (7 cases). In terms of symptoms, neurological toxicity is the most common, followed by cardiovascular toxicity and gastrointestinal toxicity.

Conclusions

Therefore, it is recommended to pay attention to the initial dose of the drug, the dose adjustment of liver and kidney function, and the drug problems that may be caused by multiple drugs. If necessary, the patient can consult a nutritionist to make daily diet adjustments, which has reached the goal of Holistic Health Care.

Contact: LIN Ching-feng

Keelung Hospital Ministry of Health and Welfare

chingfeng01@gmail.com

A preliminary study on a long-term care institution combined with interprofessional collaborative practice model to improve quality and satisfaction of care service

YEN Yu-Ting, LU Huei-Lan, WANG Shao-Cheng

Introduction

The interprofessional collaborative practice model is a very important issue in the quality of long-term care (LTC) institutions' care service, recently. LTC institutions collaborated with medical professionals in hospital can improve the quality of their LTC services. It is hoped that LTC under the timely intervention of LTC and medical resources, the elderly can slow down their functional deterioration and maintain their quality of life.

Purpose/Methods

This study enrolled 32 elderly in a LTC institution. The elderly is referred to outpatient medical services and collaborated with other interprofessional medical members. Team members include physicians, nurses, occupational therapists, psychologists, and social workers, linking the hospital professional directors in various medical fields of the department to improve the quality of medical care for LTC care. Under early

diagnosis and timely medical intervention, we would like to reach the goal of primary prevention in the susceptible stage.

Results

The results show that in serving 32 elderly, 60% of them are difficult-care cases. By performing the interprofessional collaborative practice model, more than 70% of the LTC cases are referred to medical service resources and then intervened by professional medical care plans. Early diagnosis and early referring to medical services to maintain their life quality and slow down functional deterioration; from 108 to 109 years, 78% of the 32 elderly in the LTC were assessed by the annual CMS, which can maintain their original CMS. In the second LTC assessment, 13% of the LTC elderly have a lower CMS level, and only 9% of the cases have improved the LTC level. Overall, in the satisfaction of LTC institutions from 108 to 109, 90% in terms of service attitude, service items, service time and environmental facilities, and the overall satisfaction reached more than 95%.

Conclusions

LTC institutions using interprofessional collaborative practice model to jointly take care of cases can not only strengthen the LTC resource system and integrate and construct a complete medical care process, but also effectively improve the safety and medical quality of LTC cases, maintain their life quality, and slow down functional degradation.

Contact: YU-TING YEN

Jianan Psyciatric Center

cute-baby123@yahoo.com.tw

Implementation of Patient-centered Integrative Home Medical Services in Rural Communities– A Geriatric Oncology Case Study of Inter-professional Communication and Collaboration

WANG Kuan-Yuan

Introduction

Older people have complex healthcare needs and require multiple healthcare professionals to address issues regarding their health status. Our team comprises geriatricians, nurses, social workers, and case managers. The role of the geriatrician is to coordinate the patient's medical information from specialists and family caregivers. The case manager of the long-term care service network provided additional home service. The aim of this case study is to explore how to provide a patient-centered model of home medical care in rural areas.

Purpose/Methods

This 78 y/o female patient who has a history of DM, hypertension, liver cirrhosis, hepatocellular cell carcinoma (HCC), old CVD, Dementia, lung nodules and urine retention requires long-term urinary catheterization. She received multiple outpatient services at a rural hospital. Referral to geriatric home medical care for her poly-pharmacy was made by hospital staffs. We initiated our home medical care, working with the hepatologist in an urban hospital through desktop cloud-based electronic health record (EHR) service within our health care system.

Results

Her medications including Spironolactone, Furosemide, and Azilsartan were discontinued owing to intermittent hyponatremia and low blood pressure. We avoided Bromazepam use as benzodiazepines increased risk of delirium according to Beers Criteria for "Potentially Inappropriate Medication Use in Older Adults". Improvement of the physical condition enabled her to continue the transarterial chemoembolization (TACE) or percutaneous ethanol injection (PEI) for HCC. Under two-month close home visits, her medications had been reduced from the initial 14 drugs down to 7 ones in total.

Conclusions

We can make an adaptation of care plan over time as care needs evolve through serial assessment of home visits for home-bound older people due to impaired mobility. Therefore, the higher level of specialty care for geriatric oncology patients living in the rural area was made possible by the connection of geriatrician-based interdisciplinary team care using EHR technology between different levels of hospitals. We had also reduced the number of simultaneous use of multiple drugs to avoid their adverse effects.

Contact: WANG KUAN-YUAN

National Cheng-Kung University Hospital, College of Medicine, NCKU

wang.kuan-yuan@fulbrightmail.org

Use Fall Prevention Smart Technology assisted Medical Decision-Making to Reduce Fall rate of the Stroke Patients at Home

CHANG Chi-Hsuan, SU Hsi-Hsun, LAY Huey-Jen

Introduction

Fall injury is the biggest complication after stroke and an important quality indicator of hospital. Feng-yuan Hospital's Rehabilitation Department has begun to improve the risk factors for falls of hospitalized stroke patients with Team Resource Management (TRM) in 2010. After improvement, the incidence of hospitalized falls has been reduced from 0.2% to 0.13%. It is hoped that this anti-fall plan could be extended as 'Fall-Prevention 2.0' after the patient is discharged from the hospital. It has been applied to stroke patients with Post-Acute-Care(PAC) program since 2014.

Purpose/Methods

Based on the results of the literature review, we have developed a 'Fall Prevention Smart Technology assisted Medical Decision-Making Module': 1. Peer group: fall prevention education during hospitalization and home environmental modification education. 2. After the medical records are electronicized, the indicators are visualized through Tableau software. It is convenient to communicate suggestions for home environmental modification for high-risk fall groups (BBS <40 and Gait speed <0.8 M / s). 3. "Home Environment Assessment and Modification with wearable smart device and app" to achieve more accurate assessment of home environment safety.

Results

Decrease the fall rate of stroke patients with PAC after being discharged from hospital: 13.79% (2018/9 follow-up period: 10.77%) (2019/9 re-follow-up: 15.14%). The home-based fall rate is better than the literature data by 37%. It is also better than the general stroke patients that did not participate in the PAC plan: 29.82% (p <0.05). Those who were assessed as high-risk fall groups and received the "Home Environment Assessment and Modification with wearable smart device and app", had a fall rate of 3.33% (tracking period: 8.33%), which was significantly lower than 17.86%(p=0.10) (tracking period: 30.77%,p=0.04), who did not received, which represents the importance of "Home Environment Assessment and Modification" on reducing the risk of falling at home.

Conclusions

This 'Fall Prevention Module' can significantly improve the stroke patients' falling rate at home. We are still making progress. Last year, in line with the Long-Term Care Plan 2.0, we use the opportunity of Home-based rehabilitation to provide free "Home Environment Safety Assessments", and let us obtain the "Long-Term Care Plan 2.0 Friendly Discharge Readiness Service Hospital Certification".

Contact: SHEN HsuPing

Feng Yuan Hospital of the Ministry of Health and Welfare

hph@fyh.mohw.gov.tw

Effects of Geriatric Care Skill Training Workshop for Outpatient Health Care Professionals

LO Yu-Tai, CHANG Chia Ming, WANG Ying-Wei, HU Fang Wen, HUANG Chi Chang, WU Chien-Yuan, CHUNG Yuan Fang, WANG Li Chuan, SHEN Shan Yu, LIN Dai Chan

Introduction

Population aging poses unique challenges to healthcare worldwide. Older adults have more complex health care needs, a higher chance of receiving fragmented care, and poorer health care outcomes. Because health care professionals should strengthen their geriatric care skills, educational programs teaching professionals to move from evidence-based knowledge to real practice are urgently needed. This study explored health care professionals' responses to a geriatric care skill workshop consisting of four topics: assessment, care plan development, integrated management, and outcome evaluation.

Purpose/Methods

This study used a one-group pretest-posttest design. A 7-hour workshop consisting of four topics, assessment, care plan development, integrated management, and outcome evaluation, was conducted on August 29, 2020. Trainees were outpatient health care professionals from across Taiwan. Each topic involved interactive sessions consisting of a lecture, a group discussion, and a brief group sharing session. A self-evaluation of knowledge and competency in providing geriatric care was collected before and after the workshop.

Results

Of the 52 enrollees, 37 completed the evaluation. The majority of the trainees were nurses (38.5%), administration staff (28.8%), and physicians (15.4%), and most worked at local hospitals (51.9%). In the pretest, scores for self-evaluated outcome were the lowest among the four topics for both knowledge (2.95 ± 0.85 , total score = 5) and competency (2.95 ± 0.81). Self-evaluated knowledge and competency scores for all four topics were significantly higher after the workshop ($p < 0.05$).

Conclusions

The 7-hour, four-topic, interactive workshop can improve participants' knowledge and self-perceived competency in geriatric care. Therefore, such workshops can strengthen the ability of outpatient health care professionals to provide quality care for older patients. Further enhancements and evaluations of the geriatric care education program are required to confirm its benefits to clinical practice and patient outcomes.

Contact: LO Yu Tai

National Cheng Kung University Hospital
loyutai@outlook.com

Prevalence of hyperuricemia in elderly women in southern Taiwan

YEH Jih-Kuei, CHEN Chia-Hui

Introduction

Hyperuricemia, defined as the presence of an elevated serum uric acid concentration, can lead to urate deposit in joints, tendons, and other tissues that has long been associated with gout. The incidence of gout among women were association with menopause. Previous studies reported an age-dependent increase in serum uric acid levels among women. Aim of this study was to evaluated prevalence of hyperuricemia in elderly women in southern Taiwan

Purpose/Methods

We studied 1480 women with age from 65 to 95 years old. The subjects who visited our hospital for a Preventive health services for adults were determined during January 2019 to December 2019. Hyperuricemia was defined as > 5.5 mg/dL for women was defined by Kaohsiung Municipal United Hospital

Results

There were 935 women uric acid values under 5.5 mg/dL. There were 545 women uric acid values over 5.5 mg/dL. The prevalence of hyperuricemia was 37% in women aged 65 to 95 years old. The mean uric acid values was 9.75 ± 4.25 mg/dL, mean waist circumference was 80 ± 7.5 cm, and mean BMI (Body Mass Index) was 19.95 ± 1.95 kg/m² in the hyperuricemia women group.

Conclusions

The clinical scenarios under which hyperuricemia can be 10% develop gout. The association between serum uric acid and cardiovascular diseases such as hypertension, metabolic syndrome, coronary and cerebral vascular diseases has been reported in several epidemiologic studies. Elderly women with hyperuricemia recommended to diet control and active follow-up uric acid values.

Contact: YEH JIH-KUEI

Kaohsiung Municipal United Hospital, yzk1369@gmail.com

An elderly elderly with degenerative hip arthritis receives arthroscopic care

YANG Shih-Chen

Introduction

Degenerative hip arthritis is the most common cause of hip pain; it usually occurs on the back of the thighs and around the hips, and it is painful when walking, sitting or even lying down and sleeping. A 75-year-old male patient suffered from unbearable pain while walking and driving on the right hip joint for many years. After diagnosis, he was diagnosed with degenerative hip arthritis by MRI and was hospitalized for arthroscopic surgery.

Purpose/Methods

Applying ice to the affected limb to improve pain 24 hours after surgery; keeping the wound clean and dry; raising the pillows and moving the toes to avoid peripheral swelling; avoid squatting and going up and down stairs within 2 weeks after operation; encourage intake of vitamin C and high protein foods to promote Wound healing; progressive exercises including foot and ankle pumps, foot and ankle rotation, and hip lifting.

Results

The patient was successfully discharged from the hospital on the third day after surgery, and two weeks after surgery, there was no infection in the wound suture. There was no pain during normal operation at 1 month after operation; joint motion increased joint angle, muscle training reduced edema and increased the strength of peripheral muscle groups, and no muscle atrophy occurred.

Conclusions

Patients with degenerative hip arthritis undergoing arthroscopic surgery should maintain an appropriate weight after surgery to avoid joint injuries caused by trauma and excessive labor. Exercise 2 to 3 times a day for 20 to 30 minutes each time to help promote blood circulation and strengthen muscle Resuming the movement of the hip joint is helpful for the early resumption of daily activities.

Contact: YANG Shih Chen

Taipei City Hospital Zhongxing Branch
B1713@tpech.gov.tw

Exploring the needs and care experiences about age-friendly services among older residents in long-term care institutions: A mixed-methods study

HO Shih-Chun, TSAI Meng-Hsiu, HUANG Chien-Cheng, FAN Sheng-Yu, WU Chien-Yuan, CHIA Shu-Li, WU Chao-Chun

Introduction

Long-term care institutions provide health, personal, and support care to the older population in Taiwan. Accreditation of Age-Friendly Health Services has been implemented by the Health Promotion Administration since 2010 for developing age-friendly environments and services in institutions. However, the perspectives about age-friendly services from older adults were less to be understood. This study aimed to explore the needs and care experiences about age-friendly services in long-term care institutions among older residents.

Purpose/Methods

A mixed-methods research design was conducted, and data collection from 8 certified long-term care institutions in Taiwan. Total 117 older residents completed the structured questionnaire and 30 received the semi-structured interview. The questionnaire was designed to explore the needs and satisfaction of the age-friendly service items. The interview guidelines included six domains to explore the needs and care experiences of age-friendly services.

Results

Combining qualitative and quantitative results, the significant findings included: the environmental characteristics had to be comfort, safety, and privacy. The services included various contents, including health monitoring and medical resource connection, daily life assistance, and activity arrangements. The methods to improve life adaptation were to connect with past lives or interpersonal relationships, to enhance the value of life in institutions, and to maintain the independence of the elderly. In the end, staff had to have professional knowledge, skills and attitudes.

Conclusions

In conclusion, a friendly environment, medical needs, activity arrangements, and spiritual needs were the major expectations for age-friendly service among older residents in long-term care institutions. The establishment of age-friendly content must rely on the cooperation of staff, institutional systems, community resources, and policies.

Contact: HO Shih-Chun

Palliative Care Center, Chi-Mei Medical Center, Tainan, Taiwan
shihchunhoo@gmail.com

Building a friendly services for advanced care planning

CHU Chiu-Hua, LIN Ming-Nan

Introduction

Taiwan's Patient Right to Autonomy Act, which included advanced care planning (ACP), took effect in 2019. Strict regulations in the act making it difficult to implement, such as expense for consultation, documents needed to fill, setting of the hospital clinic, expertise of the providers. For further improvement of the quality of palliative care, building a friendly services environment for patients to understand ACP and implement the Patient Right to Autonomy Act is the task for hospitals to tackle.

Purpose/Methods

A special consultation clinic for ACP was established in 2019 in our hospital with comfortable and confidential setting. A team with certified ACP counseling trained physician, nurse and social worker provides the services. Website, newspapers, lectures to spread the information for ACP services were held. Subsidy for patients was also provided. We conducted a research to evaluate the patients' motivation and satisfaction of ACP consultation with a questionnaire from April 2019 to November 2019. 123 patients were evaluated. The ACP clinic services was less frequently provided since the outbreak of COVID-19. However, there is a silver lining in this pandemic in giving people reflects the issue of life and death. We provides video consultation ACP as needed.

Results

Of the 123 patients, 41 was male. 77% was older than 50 years old. 94% of the patients visited the ACP clinic expected a good death with dignity. 88% of the patients wishes to arrange their way of treatment by themselves. 80% of the patient wishes to reduce the responsibility of their family members when they are in their terminal illness. 20% of the patients expressed that expenses will influence their willingness in visiting the clinic.

Conclusions

For promoting the awareness and practice of ACP for patients to improve the autonomy, a well-arranged environment and process will improve the results. However, expenses is one of the possible factors reduce the willingness. A well-trained team is also required.

Contact:

Buddhist Dalin Tzuchi General Hospital
chiu.hua1965@gmail.com

Effects Of Senior Simulation Program For People Working At Health Care Institution

LEE Pei-Hsuan, HUNG Shih-Yu, HUNG Shan-Ching, YANG Hui Fei

Introduction

According to WHO population data, it is estimated that Taiwan will enter a super-aged society in 2026. The problems arising from "aging" are not only the degradation of physiological functions, but also many complex and diversified health problems. Thus, if medical staff can understand the process of physical and mental changes that according to aging, and possess good care knowledge and professional skills, they should be able to improve the quality and effectiveness of long-term care.

Purpose/Methods

For different types of health care institutions, different senior simulation programs are applied to experience the inconvenience caused by aging, and to understand the importance of a friendly environment to the elderly. We collect the feelings before and after the program with the "Multiple Feedback Card". We hope the participants can treat and serve the elderly with empathy after class, as well as applying the concept of "Elderly Friendly" in the workplace, and create a friendly health care institution.

Results

A total of 37 "Multiple Feedback Card" were collected, and was analyzed with Grounded Theoretical. Before the program, 68.9% of the misunderstandings about the elderly are the physiological aspects that they felt the elderly move slowly, and 20% are the psychological aspects that elderly are stubborn and difficult to communicate. After the program, the participants mostly think about the inconveniences of their living environment from the view of the elderly, and instead treat the elderly with consideration.

Conclusions

Through the experience of this course, participants can change their attitudes towards the elderly, and because of the various inconveniences of the elderly during the experience, the organization is willing to change their medical environment to meet the needs of the elderly.

Contact: LEE Pei Hsuan

DITMANSON MEDICAL FOUNDATION CHIA-YI CHRISTIAN HOSPITAL
cych13199@gmail.com

The Effect of Health Education Courses in Disability Prevention on the Health Literacy of the Elderly in the Community

WU Pei-Chun, WANG Chen-Wei, HSU Hung-Yi

Introduction

As the medical technology advances, elderly population life expectancy increase, and physiological organs are aging, leading to increased risk of disability. According to statistics in 2018 from Taiwan Ministry of the Interior, the proportion of the population aged 65 or older had to 14.56%, that has entered an aged society. In order to enhance the awareness of elderly people about disability prevention, the hospital conducted health education courses in the communities, so as to increase health literacy.

Purpose/Methods

In this study, involved senior citizens in central Taiwan community as the research object and invited department of geriatrics nurses with clinical experience to give a health education course on disability prevention. In order to compare the differences before and after courses, we conducted tests before and after the courses. Paired sample t test was used as the data analysis method to understand the cognitive degree of community seniors about disability prevention.

Results

The results are as follows there was a statistically significant difference ($p < 0.05$) in the courses on disability prevention for elderly people in the community, and the score of the post-test was significantly higher than that of the pretest, and the health literacy rate of elderly people in the community increased from 61.36% to 90.91%, signifying that the course on disability prevention was effective in improving seniors' health literacy.

Conclusions

This study confirmed that the implementation of community health education programs for disability prevention can effectively improve the elderly's relevant knowledge about disability prevention, convey correct and professional health information, assist them to promote physical activation and maintain good health, strengthen health management, improve the quality of daily life, and achieve the goal of healthy aging.

Contact: WANG CHEN WEI

cwt12907@gmail.com

Characteristics of functional ability and chronic disease condition among older patients in primary care in Taiwan

LEE Chun-Ying, CHUANG Yun-Shiuan, HUANG Chi-Yen, LEE Hui-Lan, WU Chien-Yuan, CHIA Shu-Li, WU Chao-Chun

Introduction

The population of older people is growing rapidly in Taiwan. The proportion of residents aged over 65 was 15% in 2020, estimated to be 20% in 2025. The birth rate for Taiwan in 2021 is 8.402 births per 1000 people, which is far lower than the growth of the older population. For tackling the challenge of demographic change, actions on promoting healthy ageing are urgently needed. Understanding the parameters regarding healthy ageing is important for strategy making.

Purpose/Methods

A pilot program was funded by the Health Promotion Administration (HPA), Ministry of Health and Welfare in Taiwan since 2018 aimed to implement comprehensive, functional-orientated care for older people in primary healthcare settings. The target population was the patients aged older than 65 years of the primary care clinics. Patients were evaluated and managed by primary healthcare team according to the "Guidance on person-centred assessment and pathways in primary care" proposed by World Health Organization.

Results

There were 9476 patients in the analysis, the mean age was 74±6.7 years; 58.9% were female. Ninety percent of the patients had at least one chronic disease, 65.5% had more than two chronic diseases. Females had more abnormal 3-item recall test, chair rise test, and depressive symptoms than males. Males had more abnormal whisper hearing test than females. Patients older than 75 years had higher rate of abnormal 3-item recall test, chair rise test, hearing, and visual impairment.

Conclusions

Most of the older people had multi-morbidities. Age is a significant risk factor for the impairment of cognition, physical and sensory function. There had gender difference for the impairment of intrinsic capacity. These findings suggest that personalized and comprehensive care incorporating disease and functional ability management is needed for health care for older persons.

Contact: LEE Chun-ying

Kaohsiung Medical University Hospital

cying@ms19.hinet.net

Preliminary study on age-friendly care for elderly patients hospitalized alone

LIN Ciao-Ting

Introduction

In 2018, our country reached the senior society defined by the World Health Organization, it will be an issue that the elderly are admitted to hospital alone without anyone to take care of them in the future. Therefore, the purpose of this study is to explore whether the trend of unattended care for elderly patients is increasing, and to explore the causes, hoping to serve as a basis for solving the problem.

Purpose/Methods

Statistical analysis was carried out on the number of elderly patients with care problems referred by nursing staff at our hospital from 2018 to 2020, and descriptive statistics were used to summarize the characteristics of the cases of hospitalized alone and unattended patients.

Results

Results showed that, in 2018, there were 52 referred cases, 20 cases (38.5%) were included as unattended patients, 61 cases were referred in 2019, 26 cases (42.6%) were included, and 73 cases were referred in 2020. 35 cases (47.9%) were included as unattended patients. The top three reasons are the inability to

hire nursing attendant, the lack of manpower for care, and the reluctance of family members to pay attention to them.

Conclusions

In conclusion, the number of hospitalized and unattended elderly patients is increasing. Financial problems and lack of manpower are the primary issues. If hospital friendly shared care model is implemented, it can not only reduce the family's financial and caregiving burden, but also solve the problem of care for the elderly.

Comments

With the advent of elderly society, elderly patients hospitalized alone is an inevitable problem. If the hospital friendly shared care model is properly applied, it will: (1) improve the quality of patient care, (2) reduce the burden on the family, and (3) reduce the risk of nosocomial infections. It can also promote the hospital to become an age-friendly hospital.

Contact: CHIA WEN Lai

Show Chwan Memorial Hospital

CHANGHUA, chd7203276@hotmail.com

The effect of acupoint massage group on the physical and mental health of the elderly in day care

HUANG Hui-E, CHEN Shu-Fen, LU Huei-Lan, WU Wen-Cheng

Introduction

There were total of 20 participants aged from 50 to 75 years old. Their diagnosis distributed as 60% dementia, 20% schizophrenia, and 20% severe depression. Using the sensory stimuli of different acupoint massage to explore the psychological and physical effects on elders who stay in the hospital during daytime to participate in the Evergreen Health Massage Group.

Purpose/Methods

In January-April 2019, a 8-week group of self-massage for acupressure named as "Changqing Health Massage" was conducted every weekly. The target population were elderly people who were in the daycare in a mental hospital in the southern Taiwan. During the group process, a Chinese physician was invited to introduce the acupressure. Continually, the group leader performed acupoint massage according to the body parts, including head, eyes, head and neck exercise, and for sleep and cold compressions.

Results

The self-developed group benefit assessment tool and the group satisfaction survey were conducted before and after the group. In psychology, "I'd like to increase acupoint massage" were raised from 50% to 85%, and "I had fun activities and felt good" were raised from 40% to 80%. In physiology, "Acupoint massage can help us to increase sleep" were raised from 50% to 75%, and "It helped me to improve stomach and intestines function" were raised from 50% to 85%.

Conclusions

Through the group activities of "Evergreen Health Massage", 90% of the elders stated that they wanted to continue

participating, the elders felt happy and interesting by knowing acupressure. Group activities showed positive effects on the elderly's psychology and physiology. It is expected that such group designs can be used in other clinical fields in the future.

Contact: LU Huei-Lan

Jiannan Psychiatric Center, MOHW

14404@mail.cnpc.gov.tw

The preliminary effects of improving oral hygiene for main caregivers at Home

HU Wen-Hsin, HSU Chia-Chien, WANG Jia-Ning, HOU Chun-Mei, CHEN Shu-Nuen, TSAI Yi-Fan

Introduction

Our unit is a home care nursing unit attached to the Taipei Regional Hospital in Taiwan. In December 2018, two cases were found to be hospitalized for treat pneumonia. The incidence of pneumonia was higher than the threshold. We found that the cause of pneumonia due to failure to perform oral hygiene. Our study will discuss the correct rate of oral hygiene performed by home caregivers, and hope to increase the skills and knowledge of oral care for home caregivers.

Purpose/Methods

The study period is from January 2019 to December 2020. First, we investigated the oral hygiene skills and knowledge of the main caregivers at home. Second, a demonstration flowchart of oral hygiene skills will be posted on the home bedside. Multilingual instruction leaflets and health education videos will be used as teaching assistive devices. Finally, through the one-on-one demonstration teaching and evaluate the main caregivers, then give feedback at any time.

Results

A total of 186 cases were received. The accuracy rate of the oral hygiene skills performed by the main caregivers at home was increased from 48.0% to 85.6%. The knowledge of oral health care of the main caregivers was increased from 44.5% to 94.0%. We found no cases of hospitalization for pneumonia due to poor oral hygiene.

Conclusions

Main home caregivers really perform oral hygiene skills that could reduce aspiration pneumonia caused by improper oral health care, and also improve the quality of home care. The home caregivers understand the importance of maintaining oral hygiene and the home care nurses bring into play the professional role of a direct health care provider.

Contact: TSAI YI-FAN

Taipei City Hospital, Young Ming Branch

b1717@tpech.gov.tw

Well-being discharge preparation - discharge preparation of a solitary old-aged patient

CHEN Hsiu-Ju, CHEN Wei, KUO Yi-Chun

Introduction

In aging population society, there are more and more situations about the care of solitary elderly and old-care-old. It is important to set up supporting system for old-care-old centered on a living home. This paper describes an aged couple living in solitude. The husband had a hip fracture. The weak wife took cares of him because they do not want to bother their children living at other cities. Discharge preparation from the hospital takes individual situation into account, works through sub-special team cooperation, helps the couple with resources of home aid and arranges in-home local doctor visit. The couple were taken care of the inconvenience and live with ease in the community.

Purpose/Methods

This paper is a quality research. The data were collected by story narration and involved observation. The interview was segmented by number and explained with meaning by related articles.

Results

1. Altering the thinking of old-care-old :The elderly with chronic disease and physical degradation always result in malnutrition and circumstance endangering. It is important to strengthen social care and supply of resources. As of providing caring service, it is more important to apply to their demand rather than the curing their mental or physical condition. 2. A care with well-being : Home-centered Caring provides transportation for the aged with hip fracture and lending of electrical bed, wheel chair and walker from rehabilitation resource center. The service also involves at-home medical treatment and physical therapy to restore daily life. If the care-giver has medical demand, then it also can provide at the same time.

Conclusions

At aged population community, the core value of individualized resources supply and mediation is well-being sensation and self-independence, rather than just keep a living. Considerate company and more social involvement can restore the aged previous living function and independence. At old-care-old, we should avoid the care-giver to become the cared. Old-care-old or living in solitude may not be unavoidable but not necessarily sad or dark.

Contact: LEE Pei Hsuan

DITMANSON MEDICAL FOUNDATION CHIA-YI CHRISTIAN HOSPITAL

cych13199@gmail.com

Distribution of Serum Prostate - Specific Antigen in elderly men in South Taiwan

YEH Jih-Kuei, CHEN Chia-Hui

Introduction

The incidence of prostate cancer has been rapidly increasing in the past 10 years in Taiwan. Prostate-specific antigen (PSA) is a serine protease produced predominantly by the prostate gland and is the most widely used tumor marker for prostate cancer. The cutoff values for PSA screening are 4.0 ng/mL, and may increase with prostatic hyperplasia. In this study was to evaluate the distribution of serum prostate-specific antigen (PSA) levels among elderly men in South Taiwan.

Purpose/Methods

Between January 2019 and December 2019, the serum PSA levels of the subjects who visited our hospital for a Preventive health services for adults were determined. All men who were older than 65 years with an serum PSA values between 2 groups (greater than 4.0 ng/mL and under 4.0 ng/mL). There were 1578 men (aged from 65 to 97 years old) were included in the study.

Results

The mean PSA level was 1.61 ± 0.9 ng/mL in the group age from 65 to 74 years old, and 8.61 ± 5.25 ng/mL in the group age more than 75 years old. 1293 men were under 4.0 ng/mL (Mean \pm SD = 1.985 ± 1.975 , Range: 0.1-3.96), and 285 men greater than 4.0 ng/mL (Mean \pm SD 33.23 ± 29.23 , Range: 4-62.46). 223 men PSA levels were range from 4-10 ng/mL, 51 men range from 11-30 ng/mL, and 11 men range from 31-65 ng/mL.

Conclusions

The higher mean serum PSA level was in the age more than 75 year old group. These findings concern that the serum PSA may correlate with age. All men should be tested for PSA in the elder age and be informed about the benefits and risks. It is also recommended that men with a family history of prostate cancer start this test earlier.

Contact: YEH JIH-KUEI

Kaohsiung Municipal United Hospital
yzk1369@gmail.com

Prevalence and Risk Factors of Low Bone Mass among Middle-aged and Elder Diabetic Patients

HWANG Lee-Ching, CHOU Yun, TSOU Meng-Ting, CHAN Hsin-Lung

Introduction

Diabetes and osteoporosis are prevalent diseases and cause important health problems. There are few studies on the risk factors of low bone mass in diabetic patients. The aims of this study were to explore the prevalence of low bone mass and its associated predictors in middle-aged and elderly diabetic population.

Purpose/Methods

We recruited 1,372 diabetic participants aged more than 50 years who underwent routine health check-ups including bone mineral density tests during 2008-2018. Bone mineral density tests were measured by using dual-energy X-ray absorptiometry, and categorized into normal, osteopenia, or osteoporosis. Low bone mass was defined by the composite of osteopenia and osteoporosis. The prevalence of osteopenia or osteoporosis was calculated, and the risk factors for low bone mass were proposed after adjusting for potential confounding factors.

Results

The mean age of the population was 62.2 ± 7.3 years. Overall, 42.1% had osteopenia and 6.3% had osteoporosis. Older populations had higher rates of osteopenia and osteoporosis. Low bone mass was found to be significantly correlated with female, lower body height, lower body weight, and lower body mass index. The hemoglobin, fasting blood glucose and HbA1C levels of the low bone mass group were significantly reduced, while alkaline phosphatase levels were increased.

Conclusions

The prevalence of low bone mass in diabetic patients is obviously high. This study shows that risk factors among diabetic patients include increasing age, women, low body mass index, and elevated alkaline phosphatase levels. While controlling blood sugar and body weight of diabetic patients, physicians should also pay attention to their bone health.

Contact: HWANG Lee-Ching

Mackay Memorial Hospital
hwang@mmh.org.tw

Predictors of Functional Recovery of Discharged Elderly Patients

WANG Chih-Ying, CHEN Ya-Mei, LU Feng-Ping, HUNG Ling-Yu, CHOU Chi-Chun

Introduction

Taiwan has been an "aged society" country and will become a super-aged society by year 2026. With the population ageing, it is estimated that at least eight hundred and fifty thousand individuals live with one or more disabling conditions by year 2032. Factors contributing to recovery were not clear. Therefore, the aim of this study was to investigate factors predicting older patients' functional recovery after being discharged from a geriatric ward in a medical center in Taiwan.

Purpose/Methods

We studied 131 elder patients, discharged from a geriatric ward in the medical center between April and November 2018. Comprehensive evaluations were conducted during hospital stay, including demographic, nutrition status, comorbidities, frailty, levels of physical activities and activities of daily living (ADL) function. ADL function was assessed at discharge and after discharge. The main outcome was an improvement greater than 10% in the Barthel Index (BI). Generalized estimating equation was used to identify possible factors associated function recovery over time.

Results

51 patients (38.93%) experienced functional recovery and majority recovered within 30 days after discharge. Patients with physical activity after discharge and better nutrition were significant to improve their functions. Besides, the effects of physical activities were stronger among patients with poorer BI; as the time goes, the effects became stronger with better chance of function recovery (at 30 days after discharge, OR 5.79, $p=0.0009$; at 90 days, OR 6.593, $p=0.0006$; at 180 days, OR 8.75, $p=0.0002$).

Conclusions

Physical activity after discharge and nutrition status were predictive factors of functional recovery. The results suggested that nutrition status should be monitored at routine among hospitalized elderly; besides interventions and education were recommended before discharge. Physical activity after discharge has shown to be a strong effect to functional recovery; as the time goes, the effects became stronger. Therefore, emphasizing the importance and how to perform physical activity, especially within 30 days after discharge was necessary.

Contact: CHOU Chun chen
Yonghe Cardinal Tien Hospital
cthyh103@gmail.com

Combined intervention course for sarcopenia in a medical center of Northern Taiwan.

LU Nai-En, CHEN I-Ling

Introduction

Skeletal muscles play a very important role in maintaining physical function in old age, but skeletal muscle mass will decrease with age. Sarcopenia is a syndrome manifested by muscle's dysfunction. Sarcopenia is a major risk factor leading to disability, slip, high mortality rate and many other poor health conditions in the elderly. Good-quality protein intake and exercise usually are critical for preventing and treating Sarcopenia.

Purpose/Methods

The Department of Family Medicine, Rehabilitation, and Nutrition in Far Eastern Memorial Hospital cooperated with the Department of Public Health in National Taiwan Normal University to develop a combined intervention course to prevent muscle weakness, including diet modification and special-designed exercise program during 12 weeks for elderly with sarcopenia. We also trained observers composed of university students, hospital staffs, and community volunteers to become a lecturer during the course.

Results

Totally 98 patients met the criteria of sarcopenia and participated the course at our hospital and adjacent communities. Muscle power significantly strengthened using grip strength and chair stand test ($p < 0.05$). Test for the knowledge of sarcopenia also improved significantly, which reporting the right answers as high as more than 90% by the participants. The observers had significantly progressed as an instructor of the course about sarcopenia after paper tests and questionnaires.

Conclusions

The participants could change their knowledge, attitudes, and muscle power significantly after the combined intervention course for sarcopenia without any medications. With this plan, the potential-high-risk group suffering with sarcopenia could spend their old age in a familiar environment and reduces the burden of home care. They can also disseminate the right concepts of diet and exercise to their relatives and friends to promote health. The observers could be trained as a lecturer after appropriate education and practice.

Contact:

ruby41233@gmail.com

Using Design Thinking Model to Increase the Cases of Colon Cancer Screening and Positive Follow Up of Elderly People in A Taiwan Local Clinic

LIN Ching-Yu, TSAI Chien-Tsung, SU Ching-Chuen

Introduction

Colon cancer could be early diagnosed by stool occult blood (stool OB) test. In Taiwan, the test is sponsored by the National health insurance (NHI). However, some people with positive findings refuse to have the colonoscopy confirmation, especially in elderly people. Therefore, we use design thinking model to investigate the interferences of the colon cancer prevention, and provide interventions to improve the results.

Purpose/Methods

We interviewed the people had stool OB test and with positive findings in 2016 to 2018 in Gongguan Township, Miaoli County, Taiwan. Time wasting of identity inquires, and discomfort of colonoscopy follow up were the major interferences after the phone interviews with the positive cases. Accordingly, We connected to the data base of NHI to simplify the inquires of client's identity of stool OB test. If the patient visit our clinic and matched the criteria, who would have a list of available cancer screening items on the receipt. The list would help the doctor and staffs to encourage the patient to have the cancer screening, and the list could be cancelled after the one finished the tests. For the people with positive findings, we provided anesthesia colonoscopy to encourage the them to have diagnosis confirmation in 2019. The data of 2018 to 2020 were analysed to compare the results before and after interventions.

Results

In the total amount of stool OB test, there were 96 cases in 2018, and significantly increased to 180 cases in 2019, 211 cases in 2020. In elderly (over 65 year old), there were 33 cases in 2018, 65 cases in 2019, and 87 cases in 2020. In the rate of positive follow up, there were 11 positive cases in 2018, and only 4 cases finished the colonoscopy. In 2019 and 2020, there were 15 and 10 positive cases, 8 and 6 cases finished the colonoscopy. In elderly, the follow up rate is 16.7% in 2018 and the follow up rate had a three time growth in 2019 and 2020 (from 16.7% to 50%).

Conclusions

The improvement of total amount of stool OB test and positive follow up were significantly changed after interventions of design thinking model. In elderly, the improvement were more significant.

Contact: LIN Ching-Yu
Dachien General Hospital
plastic35@yahoo.com.tw

Personal Hygiene Policy and the Incidence of Repeat Urinary Tract Infections in Aging Women

CHUANG Yun Chieh, CHO Mon Der, YEN Chia-Chi

Introduction

Urinary tract infections are commonly seen in urology clinics but repeat urinary tract infections reduce aging women's quality of life. Therefore, the aim of this study was to determine the influence of feminine intimate care products and care policy on the incidence of repeat urinary tract infections.

Purpose/Methods

This prospective questionnaire-based study aims to determine whether the feminine intimate care product and use policy can reduce the incidence of repeat infection or not. The study was conducted from 2017/03/01 to 2018/12/31. Patients aged over 60 who suffered from more than two urinary tract infections in a year were recruited. The study end point was the incidence of a repeat urinary tract infection 91 days and 182 days after previous treatment.

Results

We included a total of 171 female patients in this observational study, whose median age was 67 years old (range 60-78). Average BMI was 26.4±4.92. When considering the 91-day protection effect, the OR for patients using one care product compared to no-use patients was 0.15 (95% CI 0.07~0.31, $p<0.001$), and using two products compared to no-use patients, the OR was 0.43 (95% CI 0.19~0.94, $p=0.033$); when patients using three or more care products are compared to those who do not use anything, the OR was 0.49 (95% CI 0.18~1.35, $p=0.165$). When considering the half-year protection effect, comparing patients who use one care product to those who do not use any products returns an odds ratio of 0.12 (95% CI 0.058~0.265, $p<0.001$), while using two products compares to not using any product demonstrates an odds ratio of 0.315 (95% CI 0.141~0.70, $p=0.005$), and using three or more products has a 0.35 protection effect (95% CI 0.129~0.922, $p=0.034$).

Conclusions

For aging females who suffer from repeat urinary tract infection, personal hygiene and feminine intimate care policy may be considered in treatment plans.

Contact: HUANG hsin-jou
Kaohsiung Municipal Min-Sheng Hospital
hsinjou1224@gmail.com

Relationship between sleep volume and falls in the elderly

KIM Kue Sook, KIM Seok Yeon, RYU Heui Geun, LEE Ji Hong, LEE Yu Jeong

Introduction

Sleep deprivation increases the risk of diabetes, heart disease, and obesity, which can directly harm health or increase the chance of a safety accident. The primary function of sleep is to restore vitality, not only to the body but also to the mind and brain. Sleep time is also known to affect mortality. The purpose of this study is to identify the causes of sleep deprivation in the elderly and the relationship between sleep volume and fall.

Purpose/Methods

In this study, we analyzed 1,490 subjects who were over 65 years old and responded to health questionnaire, examination and nutrition survey. The chi-square test was performed to examine the general characteristics of the elderly patients and the differences between the sleep groups.

Results

There was a statistically significant difference in sleep deprivation factors among the spouse, the number of chronic diseases, and the amount of activity, and the fall rate of the elderly whose sleep amount was lower than the recommended amount of sleep was higher than that of the elderly who did not.

Conclusions

Falls in older people are associated with secondary disability, increased length of stay and increased health insurance premiums. In addition, insufficient sleep causes cognitive and behavioral disorders to increase the occurrence of safety accidents. Therefore, it is necessary to manage the safe environment and appropriate activities for the elderly to get enough sleep.

Contact: KIM KUE SOOK

Seoul Metropolitan Dong_Bu Hosp Health Promotion Center/
KIHIP
mdkimks00@gmail.com

Taiwan makes it easier for elderly to get medical treatment

CHANG Hsiao-Hung, LIN Chi-Lind, HSU Hui-Ying

Introduction

Due to the declining birthrate and the aging population. The government has signed a cooperation contract with the medical institution. If the elder have a disability level of 4 or higher, the certified long-term care manager by the local health Dept send the case to the cooperative hospital for transportation service. The elders can be safe to go to doctor.

Purpose/Methods

The hospital set up the "Elder Friendly Clinic" for the elders to have better medical services. When an elder inserted an IC card

at the outpatient clinic, the system would automatically connect to the doctor's consultation system and show a reminder the nursing staff would prioritize services such as consultations and receiving medicines. The commissioner of the long-term care department in the hospital would care for the elders by phone every day and reminded the elders to return to the hospital for follow-up visits and assist in arranging shuttle buses. All hired drivers have EMT1 qualifications. They can help the elders to get on and off the bus and fasten seat belts to ensure the elders' safety on the way to hospital.

Results

Observed the elders using LTC transportation vehicles to seek medical services, the most commonly seen departments are 1. Renal dialysis 2. Cardiology 3. Rehabilitation 4. Traditional Chinese acupuncture 5. Nephrology 6. Orthopedics 7. Neurology 8. Thoracic Medicine 9. Urology 10. Metabolism and etc...

Conclusions

The public and their families expressed "satisfaction" with the LTC transportation service. A few people suggested: 1. A maximum of 8 trips per person per month is not enough for long-term dialysis patients. I hope to increase the trips. 2. Elders are less tolerant when waiting for a doctor. They need to wait for a ride on the same route before returning home after seeing a doctor. They have less patience. The author found that some elders temporarily suffered from emergency symptoms, and their family members did not call 911 for the first time, but requested a LTC to delivery car to pick them up. Maybe this is a different kind of trust.

Comments

The common responsibility of society is to assist elderly people with mobility impairments to seek treatment and delay disability and dementia. At the same time, it can also reduce the financial pressure on family caregivers.

Contact: CHIA WEN Lai
Show Chwan Memorial Hospital
chd7203270@hotmail.com

The Effectiveness of Mahjong Activity on Cognitive Functioning and Self-Reported Health Condition amongst Older Adults with Mild Cognitive Impairment (MCI) : A preliminary study.

KUO Nai-Yu

Introduction

Major neurocognitive disorder (MND) is an age-related disease that the incidence rate increased while people aged. As the population with MND grows, it is undoubtedly causing a huge burden to society and family. Mild cognitive impairment (MCI) is a cognitive status between normal and MND, by extension, a reversible phase that we should focus on to manage MND. Mahjong, a tile-based board game originated in East Asia, has been used as an activity in many long-term care settings. However, the effectiveness of mahjong activity in enhancing physical and psychological health remained unclear, this study

was to investigate the benefit of mahjong activity among people with MCI.

Purpose/Methods

One-group pretest-posttest design was applied to investigate the psychological and physical health benefits of mahjong activity amongst people with MCI. The Short Form 36 Health Survey (SF-36) and the Montreal Cognitive Assessment (MoCA) were used as outcome measures. Two participants were recruited from outpatient at Taipei Tzu Chi Hospital. The inclusion criteria as followed: 60 years old and greater, have been diagnosed with MCI by, and with experience of playing mahjong. After the pre-test, the subjects then participated in a twelve-week mahjong activity session, once a week, 90 minutes per session, led by an occupational therapist.

Results

The post-test results after the twelve-week session indicated a striking improvement in self-reported health conditions, including physical and psychological health by SF-36; while the cognitive benefits remained uncertain by MoCA.

Conclusions

This study revealed that participating in mahjong activity on a regular basis was beneficial in enhancing self-reported mental and physical health. However, the cognitive benefits of mahjong activity amongst people with MCI remained unclear. Multiple factors should be further considered under comparison between the two participants in our study. We concluded some potential factors including past medical history, proficiency of mahjong, and lifestyle.

Contact: KUO Nai-Yu
Taipei Tzu Chi Hospital, Buddhist Tzu Chi Medical Foundation
nkuo@usc.edu

Interdisciplinary team approach for the elderly of frailty: The community-based exercise mode in Taiwan

LI Tsuei-Ping, FANG Chih-Yuan, TSENG Yu-Han, SHIH Ching-Lin, LAY Huey-Jen

Introduction

Elderly of frailty is not only a decline in physical strength, but gradually loss of function, resulting in muscle weakness, slower pace, poor exercise tolerance. The prevalence in Taiwan is about 8.3%. Resistance exercise can improve muscle strength and physical activity significantly and elastic band training can improve related physical and mental functions. Six weeks of self-training with elastic bands can improve the related functional indicators of the elderly, promote the quality of life and reduce the status of disability.

Purpose/Methods

A quasi-experimental design was used in patients from the community. Grip strength of hands and six-meter walking speed test were measured before intervention, followed by 12 weeks home exercise training program. One-hour education course about motor skills and knowledge was given, including dose of elastic band training (two sets a week, 40 minutes one set,

Ratings of Perceived Exertion level 11) by physical therapists before intervention and exercise log completed at home. SPSS 22.0 was adopted in statistical analysis.

Results

Average age in 82 completed of 104 recruited cases is 71.5 ± 4.8 y/o and 65.9% are women. They accomplished 2.5 ± 0.8 times of group health education courses and 20.4 ± 14.3 sets of elastic-band home exercise. Between pre- and post-intervention, Frailty index is 1.8 ± 0.8 and 1.3 ± 0.6 ($p < 0.001$). Women's waist circumference is 82 ± 9.9 cm and 80.4 ± 9 cm ($p = 0.005$). Grip strength is 20.0 ± 4.1 kg and 21.9 ± 4.5 kg (for women, $p < 0.001$); and 31.6 ± 5.2 kg and 34.0 ± 6.5 kg (for men, $p = 0.01$). Walking speed is 0.86 ± 0.2 m/s and 0.89 ± 0.2 m/s ($p = 0.014$, significantly).

Conclusions

The study in Taiwan showed a 12-week, interdisciplinary team approach for elderly of frailty with elastic-band home exercise mode, improving the frailty index, waist circumference, grip strength and walking speed with statistically significant difference. In the future, we will consider different duration of intervention and variety of sports field, combined with keeping diary records and re-visit physical therapists giving health education guidance, in order to get more improvements on the function of the frail elderly.

Contact: SHEN HsuPing

Feng Yuan Hospital of the Ministry of Health and Welfare,
hph@fyh.mohw.gov.tw

Poster Session 18: Age-friendly health care: Supporting behavior change and healthy lifestyles

Correlation between dietary intake and improvement of muscle strength after community elderly nutrition guidance intervention

LAI Chin Lien

Introduction

At present, the average life expectancy of Taiwanese people has increased. Taiwan has entered the "aged society" and will enter the "hyper-aged society" by 2025. Is the quality and quantity of dietary intake related to the prevention of age-related diseases adequate? Strength maintenance is an issue that needs attention. The service area of the hospital is in the central and eastern districts of Taichung City. The community characteristics belong to the aging community with outflow of population. Therefore, as a community hospital, the role is to enter the community to care for the elderly to guide and assist the elderly with sufficient food intake and physical activity. Preventing disease from the beginning starts with improving muscle loss. The best way is to provide sufficient nutrition to make the community elderly healthier.

Purpose/Methods

There are 72 people with age over 65 recruited from the community care base. During the four month period, a dietitian

guides a healthy diet and elderly diet production course, including awareness of food types and intake for the elderly, and methods for preparing elderly diet. Rehabilitation instructor guides the elderly's exercise and muscle strengthening training course. The nutrition part of the pre- and post-course tests uses a mini nutrition questionnaire. The pre- and post-test part of the muscle is assessed by the fitness teacher's fitness grip test.

Results

After the community elders were involved in nutrition guidance, the ratio of dietary protein intake to 80% of the recommended amount was calculated by using the "mini nutrition questionnaire" before and after measurement, which was an increase of 11.5% from 52% to 58% after the test. In the community, the fitness strength of the elderly increased by 5%, and the grip strength increased from the average of 8.6 to 9.1.

Conclusions

Integrate community resources, hospital staff, nutritionists, and rehabilitation practitioners into the community to help the elderly improve their healthy diet and increase total dietary calories and protein intake. Rehabilitation teachers assist community elders in physical fitness and effective muscle strength training. Through pre- and post-measurement, both dietary intake and muscle strength have increased. Therefore, adequate dietary intake after nutrition guidance intervention is related to muscle strength improvement.

Contact: CHIN LIEN lai

cheng ching hospital
lie4329@gmail.com

Regular Exercise Behavior, Quality of Sleep and Quality of Life Among Elderly in Taiwan

TANG Yi-Chin

Introduction

The purpose of this study was to compare sleep of quality and life quality of the elderly who did participate or did not participate in regular exercise.

Purpose/Methods

Two hundred fifty subjects (male: 120; female: 130) were the elderly living in Taipei city, with aged between 65~85 (73.55 ± 3.15), and were the Tai chi Group ($n=70$), the Walk Group ($n=75$), and Non-Exercise Group ($n=105$). The Brief Version of the World Health Organization's Quality of Life was applied and Sleep Quality Index (PSQI) as the questionnaire. Subjects completed the questionnaire by themselves or with the help of the inquirer. Data were analyzed by one-way ANOVA, t-test, logistic and linear regression and Pearson product-moment correlation.

Results

1. The results showed that the elderly, who did not have regular exercise behavior, and between 70 and 75 years old, got worse performance in quality of sleep in general elderly. 2. There were significant differences on life quality between the two regular exercise groups and Non-Exercise Group. ($p < .05$). The order of life quality was the Tai chi Group, the Walk Group and Non-Exercise Group and differences of life quality among Groups

were significant ($p < .05$). 3. For the elderly with regular exercise behavior, adults would get better performance of quality of sleep if they did regularly exercise with increasing frequency.

Conclusions

That the elderly taking regular exercise possesses better life quality. Tai chi exercise can effectively improve the physical health of the elderly and can also provide a reference for community care workers to develop health promotion exercise programs for the elderly. Therefore, we suggested that elderly adults, who were female, between 70 and 75 years old, and without regular exercise behavior, should try to promote their quality of sleep by planning their exercise schedule and doing exercise regularly.

Contact: TANG YI-CHIN
TAIPEI CITY HOSPITAL
tangyiqing450@gmail.com

Effects of Aerobic Exercise on Muscle Endurance of the Upper and Lower Limbs for the Elderly People in Long-Term Care Institutions

YEN Yu-Ting, LU Huei-Lan

Introduction

The purpose of this study is to develop a curriculum for upper and lower limb muscle strength of the elderly people in a long-term care institutions, and to understand the effects of maintaining muscle endurance for those people.

Purpose/Methods

There are 27 elderly people in a long-term care institutions in Taiwan. The average age of these dementia and disabled elderly people is over 75 years. According to the CMS classification, 78% of the elderly people are above Grade 4, and 60% elderly of difficult care cases. The course leaders are mainly two care attendants. Each lesson including aerobic exercise with upper extremity muscle endurance for 25 minutes and relaxation of 5 minutes and then lower limb muscle endurance aerobic exercise for 25 minutes and relaxation of 5 minutes, is one hour in total. These classes are held twice a week, in total, two months were spent.

Results

With aerobic exercise of the upper and lower limb muscle endurance, 50% of the elderly people have significantly improved their functional fitness test indicators, such as upper limb muscle strength, lower limb muscles and balance ability (standing with eyes closed). Among them, 70% of the elders have improved their upper limb muscle strength and lower limb standing strength from 5-7 times to 10-12 times in 30 seconds. With 2-month muscular endurance aerobics classes on the lower extremities, it has a significant growth effect on some functional fitness indicators of the elderly people.

Conclusions

This study shows that by aerobic exercise of muscle endurance of the upper and lower limbs, the elderly people have a significant effect on strengthening the upper arm and thigh muscles. Through this simple aerobic training, the elderly people

not only can fully improve their upper and lower limb muscle strength and balance ability, but also can enhance their muscle strength, reduce sarcopenia, and delay aging. It has positive help to improve the life function of the elderly people.

Contact: YU-TING YEN
Jianan Psychiatric Center
cute-babypig@yahoo.com.tw

Efficacy of Exercise Intervention on Promoting Mobility and Physical Performance of an Elderly Nursing Home Resident with Major Depressive Disorder: A Case Study

YANG Hsinju, WANG Ya-Hui, LI Cheng-Hsien

Introduction

Exercise training has often be adopted to maintain or promote physical performance and functional independence of elderly people. The study aimed at assessing the efficacy of exercise intervention on prompting mobility and physical performance of an elderly female nursing home resident with major depressive disorder.

Purpose/Methods

The case study recruited an elderly female nursing home resident with no obvious physical disability and willing to receive exercise training in the form of an intervention designed by a physical therapist. The planned intervention incorporated torso and lower-limb endurance training, aerobic exercise, and functional training and lasted eight weeks with each week containing three daily 30~40-minute exercises. Short Physical Performance Battery (SPPB), 3-meter Timed up and go (TUG) test, and 6-minute walking test (6MWT) were used to assess pre- and post-intervention effectiveness.

Results

Results of the study showed the following improvements after the 8-week exercise intervention: speed of 4-meter walking from 1.65 to 1.50 second/meter, completion time of crossed-arms sit-to-stand test from 8.57 seconds to 7.74 seconds, completion time of 3-meter TUG from 6.93 seconds to 6.19 seconds, and distance of 6-minute walking test from 333.86 meters to 526.66 meters. Improvement was most significant in 6-minute walking test.

Conclusions

Regular exercise exerts positive influence on the physical and mental health of elderly people. Planned exercise helps promote limb endurance and aerobic capacity among elderly people, thereby improving their mobility and physical performance.

Contact: HSINJU Yang
Tsaotun Psychiatric Center, hsinruyang@gmail.com

Experience of Delaying Disability Shared by An Elderly-friendly Care Team

**HUANG Ya-Wen, CHIOU Kuan-Hua, HSU
Hung-Yi**

Introduction

Tungs' Taichung MetroHarbor Hospital wards for the elderly, especially for those aged 65 or older with multiple medical conditions. In order to enhance hospitalized seniors' muscular endurance and increase their frequency of leaving the bed, a frailty prevention program was implemented in a ward for the elderly, the intervention made in the ward for the elderly could effectively delay the degree of the seniors' debilitation and disability.

Purpose/Methods

Intervention: the control group received the TUG & CFS tests only without intervention to prevent frailty; the experimental group(1)took part in the health education interactive course in the public area of the elderly ward, including the basic muscular endurance training ; (2)received daily muscular endurance training programs in the sunlight rehabilitation room; and (3)used small rehabilitation equipment aided by volunteers, such as: hand / foot bicycle, cup stacking, corridor walking practice.

Results

A total of 108 cases were collected in 2019. After six cases were excluded , 102 cases were involved in the study.Overall, progress could be found in the baseline values in the two tests after intervention. The 3-meter TUG test improved from 52.8 ± 18.6 seconds to 38.5 ± 21.3 seconds, the CFS score improved from six points to four points, indicating that the frailty prevention program promoted in the elderly ward was an effective intervention.

Conclusions

The frailty prevention scheme encourages the seniors to leave the hospital bed and go out of the ward by offering interactive health education courses, arranging daily rehabilitation programs on muscular strength, providing small rehabilitation equipment, etc. After taking the courses and receive rehabilitation training, they made significant progress in the TUG and CFS tests, confirming that the elderly-friendly service mode to prevent frailty in elderly people can delay their weakness and disability.

Contact: HUANG Ya-Wen

Tungs' Taichung MetroHarbor Hospital
win568501@gmail.com

Square Step Exercise Class Promoted by Community Health Friend's Association

**NAKAMURA Tamae, MAEDA Motoya,
YUKI Yoshie**

Introduction

The Nishiyodogawa and Yodogawa Health Friend's Association are cooperative organizations in community for "Healthy Community Building" working in collaboration with Yodogawa Worker's Health Association (Nishiyodo Hospital). We started to promote Square Step Exercise in our community with staff of Nishiyodo Hospital, a HPH member, for health promotion of community people and to provide a place for gathering and making friends.

Purpose/Methods

Square Step Exercise is a dual task exercise, walking on a 1m x 2.5m size mat marked with 25 cm size square. Hardness level is adjustable, and it is a fun exercise effective for muscle and memory training. In 2016, hospital staff and Friend's Association executives obtained instructor's certificate and opened the first class at a hospital facility. Later, more classes were opened with helps by Friend's Association executives at various locations in communities. Instructor's training is continuously provided.

Results

Currently, the number of Square Step Class increased from 2 in 2016 to 13. Participation has grown steadily from 487 in 2016, 1713 in 2017, to 2549 in 2018. And 60% of participants also join other events of Friend's Association such as New Year Party, movie watching or thousand peace cranes making, enjoying more opportunity to meet people.

Conclusions

Through 3 years of activity to promote Square Step Exercise class, we have contributed to health promotion of community people and increase opportunities for social participation. Feedbacks of participants saying "feel better with legs and hips" or "made friends" is a big encouragement for us organizers of friend's association. Recently we received a request for cooperation from Osaka City Social Welfare Association, and we are going to discuss a possible collaboration.

Contact: NAKAMURA tamae

The Nishiyodogawa and Yodogawa Health Friend's Association
soshikika-hp@yodokyo.or.jp

Elderly Patients Fall Prevention Strategies after Transitioning from Hospital to Home

**HSING Hui-Fen, LI In-Fun, CHEN Shih-Chia,
SHIH Wei-Chu, JAN Shin-Lung**

Introduction

The elderly patients who discharged from the acute hospital are at high risk of falls, need to continue the fall prevention efforts, but hospitals focus on inpatient fall with little attention given to periods of transition from hospital to home. Only a few of the elderly patients and caregivers aware that they are probably falling at home and receiving information regarding falls before the day of discharge.

Purpose/Methods

We initiate the Transitional Fall Prevention Program, the elderly patients who still at risk on the day of discharge will receive fall prevention home safety information, included avoiding home

environmental hazards. We also develop Fall Free Discharged E-record to document individual messages and links to the community. E-record system will automatically refer fall high-risk elderly to long term center. The case managers will visit patients who are at high risk by phone.

Results

Between 2019 and 2020, a total of 3,599 discharged patients over 80 ages, most of them and their families did not know their limits and need to continue to prevent falls at home. In this program, all of them received individualized education to identify their own personal risk and prevention at home. 2,060 elderly received additional education on assisted-living facilities. The case managers tracked 2,373 elderly to follow their fall prevention implementation, and no one reporting falls during the tracking period.

Conclusions

There are restrictions on actively reporting falls to the hospital, It is difficult to collect data during the transition period. Even this, we consider promoting patient safety in the transitional period is necessary. Before discharge, identification of fall risk factors created an opportunity to address health beliefs and help the older adults to see that they were at risk for falling and conceded to make a change.

Contact: HSING HUI, FEN
Mackay Memorial Hospital
shingyanrong@gmail.com

Exploring the implementation rate of returning home for elderly patients receiving frailty nursing instruction

WU Pei-Shuang, HSU Hung-Yi

Introduction

Taiwan's elderly population has grown rapidly and reached an advanced age society in 2018. As the age grows the body ages, In addition, the elderly often think that they are unable to move when they are old, and they do not have a perfect plan for retirement. The state of reduced functional reserve capacity increases the risk of disability. Therefore, the purpose of this research is to The execution situation of returning home after receiving the instruction of debilitating nursing and prepare as soon as possible to keep the elders healthy.

Purpose/Methods

In this study, a total of 84 inpatients in the elderly ward of a hospital in central Taiwan were used as the research object. During the hospitalization period, used the color version of the health education leaflet produced by the elderly nurses to meet the health awareness and ability, and the oral guidance was used. Know the symptoms of frailty, prevent frailty measures, and conduct a telephone interview one month after discharge. The content includes: chronic disease control, eating habits, exercise habits, social interaction, and cognitive promotion activities, etc., to understand the implementation effects of elderly patients after returning home.

Results

The results found that: Give correct nursing instruction content during hospitalization and regular tracking can improve the

elderly patients to return home to maintain a good life style, and try to cooperate with the implementation of frailty measures to achieve our desired goal, the implementation rate is about 71% on average. It can be seen that the nursing guidance for the prevention of frailty can improve the effectiveness of the implementation of the elderly inpatients after returning home.

Conclusions

This study confirms that correct health education content and regular follow-up can effectively promote the correct implementation of intervention measures for the elderly, thereby encouraging the elderly to integrate them into their daily lives, improve the overall health of the body, mind, and society, increase the body's reserve capacity, and delay aging.

Contact: WU Pei-Shuang
Tungs' Taichung MetroHarbor Hospital
bigpanzi122003@gmail.com

Collaborative efforts by dentists, dental hygienists, speech therapists, nurses who particularly stick to "eating" in the Community-based Care Ward

ARAKI Takumi, OZEKI Ayako, ETO Tomoko, SOBUE Hanako, OSAKI Mayumi, MACHIDA Hanako, ITOU Hiroe, FUKUBA Isao

Introduction

In Japan, with the advent of an aging society, the "Integrated community care system" is rapidly progressing. Unlike the acute care ward that provides lifesaving and treatment using a "medical model", the community-based care ward is a ward that implements a "life function model" with the aim of returning home. Our hospital has opened 49-beds, community-based care ward in April 2019. We will report on the results of multi-professional collaborative efforts that particularly stick to "eating".

Purpose/Methods

(1) The composition of the inpatients' gender, age, and underlying disease according to the half-year period from April to September 2019 was summarized. (2) Among hospitalized patients, the number of intervention patients by dentist, dental hygienist, speech therapists, oral evaluation by OHAT, and evaluation after intervention were summarized. (3) The outcomes of hospitalized patients at discharge was summarized.

Results

Total number of hospitalized patients: 220 Dentists intervened 75 patients (34%) and dental hygienists intervened 73 (33%). The number of patients with speech therapist intervention was 94%. Oral evaluation (OHAT): The mean OHA at admission was 3.98, and the mean OHAT at the end of the intervention was 0.41. In the evaluation of the swallowing function by a speech therapist, swallowing function improvement was 28%, unchanged was 41%, and worsening was 23%, and there were more improvement groups than worse groups.

Conclusions

Inpatients in our community-based care ward are overwhelmingly elderly, and the underlying disease is often aspiration pneumonia. In addition, patients with progressive muscular neuropathy and malnutrition are also seen. About 20% of hospitalized patients were associated with swallowing dysfunction. By multi-professional collaborating and engaging with such patients, the swallowing function is improved, the meal can be taken from the mouth, the nutritional status of the whole body is improved.

Contact: KATSUYUKI Togashi
Saitama-kyoudou Hospital
k-togashi@mcp-saitama.or.jp

The Effectiveness of Oral Health Care Group for The Prevention and Delay of Disability for The Elderly in The Community Care Center

CHANG Hsin-Fei, YANG Wen-Chen, LIAO Wan-Yu, CHANG CHIEN Yu-Chen, WEI Hsiu-Fun

Introduction

To explore the effectiveness of the oral health care group activities in the community care center in preventing and delaying disability for the elderly.

Purpose/Methods

The group period is from January to March 2021, once a week, 120 minutes each time (with 20 minute break in between), a total of 12 sessions, a semi-open structured group, the themes include "How to clean teeth", "The ability to chew", "Dentist health care", "Denture management", "Treatment of bad breath", "Scent of lips and teeth", "Health from dental care"... etc. The pre- and post-test evaluations were carried out with self-developed "Oral Health Cognition Scale", "Interpersonal Interaction Scale", "Group Satisfaction Scale", and statistical analysis of data.

Results

There are 13 males and 22 females. The average age is 75.3 years, with 70-79 years old accounting for the most (57.9%), followed by 80-89 years old (23.7%), 60-69 years old (15.8%), and under 60 years old (2.6%). The education level is the most in junior high school (31.6%), followed by university (26.4%), elementary school (23.5%), and high school (18.5%). 85% of cases consciously improved their oral health response ability, 91% improved their interpersonal interaction, and 96.8% overall satisfaction with oral health group activities.

Conclusions

The oral health care group uses activities such as knowledge inheritance and experience sharing, so that members can experience the meaning of living healthy and old through mutual interaction, learn oral health-related skills, and satisfy the soul, and more can promote members to develop positive interpersonal relationships. Care programs for the prevention and delay of disability are worthy of promotion.

Contact: CHANG Hsin-Fei

Kaohsiung Municipal Kai-Syuan Psychiatric Hospital
a0985736340@gmail.com

Enhancing Health Promotion by using Square Step Exercise - Opening and supporting an exercise group run by community people -

OKUZONO Yusuke, MISHIMA Nobuyuki, ONISHI Akiko, KAGEYU Kanichi, TAKAGI Aoi, NARITA Kazuyuki, TSUJIGUCHI Shinichi, SHIMA Kyoko, MORIBE Humiko, SAWADA Naoki, MORIKAWA Nariaki, KUMON Kazunori, NAKAI Haruna, KOBAYASI Ai, KUSUKAMI Yu, TERADA Ayaka, NAKAMURA Tamae, MAEDA Motoya, YUKI Yoshie

Introduction

Japan is a top super aging society in the world, and preventive activity to avoid nursing need has become essential. Community people's activity centers i.e. "visiting place" can provide elders a place for such activity to maintain physical function and avoid nursing need. Our hospital started Square Step Exercise (SSE) group in 2015 and advocated exercise opportunity and "visiting places" for community people. We also launched a chronological follow-up study on physical strength and social backgrounds of participants.

Purpose/Methods

SSE has strong evidence in fall and cognitive impairment prevention. SSE class was first held at hospital to demonstrate, then instructor's class was organized to train residents and hospital staff in community with university professor. The work was first supported by hospital staff, but later local instructors organized their own neighborhood. Since 2018, Square Step Festival is held for annual gathering of all groups and physical strength measurement and survey.

Results

Total of 14 exercise circles including the one in hospital were opened over the course of three years, and grand total of participants accounted for 5352. For physical strength measurement since 2018, average age of participants who have continued for two years has increased by 1.1 years, whereas the physical strength age decreased by 0.5, meaning the physical strength became younger by 1.6 years as a result.

Conclusions

According to the result of physical strength measurement, the people who continuously participated had tendency to maintain or improve physical strength. We could only help limited number of community people, if the work was organized only by hospital staff. However, if hospital staff help to increase the number of local leaders among community people/hospital cooperative organization, those leaders can open a greater number of circles,

providing "visiting places" and opportunity to exercise for more community people.

Contact: OKUZONO Yusuke
Nishiyodo-hospital
doruharu@gmail.com

Poster Session 19: Health promotion strategies for dementia

Preliminary Study on Support Group Interventions for those Family Caregivers with Dementia

WANG Mei Shu, CHEN Ru Lan, YANG Li Ming, SONG Xiao Rui

Introduction

Ambiguous loss in those who family caregivers with dementia is an issue warranting attention. This study was based on the Meaning-reconstruction model and adopted the support group to achieve the following three objectives: (1) Re-build ties by designing and sharing support group activities that help family caregivers to establish a bond with their sick family member. (2) Forge stronger social relations by having dementia patients and their family caregivers participate. (3) Enhance self-efficacy through completion of art creations experiences.

Purpose/Methods

This study targeted patients with dementia and their family caregivers. This study adopted purposive sampling and conducted a simple questionnaire survey after group participation. The Five-point Likert scale was used to rate the patients and family caregivers' self-perception regarding five dimensions of stress alleviation, emotional support, self-expression, universality, sense of achievement, and self-efficacy (total score=5 points) as well as overall group satisfaction. The results were analyzed using descriptive statistics.

Results

The group activity was held three times with a total of 55 participants, of which more than 92.5% were satisfied with the group activity. Twenty-seven questionnaires were retrieved from family caregivers. Group performance evaluation results revealed that the family caregivers most strongly perceived alleviation of stress, followed by self-expression and self-efficacy.

Conclusions

Support groups for family caregivers can help family caregivers to de-stress from care tasks, express themselves, and enhance self-efficacy. The findings of this study can serve as reference for relevant healthcare professionals.

Contact: WANG MEISHU

Mackay Memorial Hospital, New Taipei City, Taiwan, ROC,
Department of Social Ser

New Taipei City, Taiwan,,
christine@mmh.org.tw

Integrated Dementia Care Center: An Experience of a tertiary medical center in northern Taiwan

CHEN Yu-Ju, CHEN Pei-Hao, WU Wen-Chun, CHANG Yu-Wen, TSENG Hsiao-Ching, LEE Lu-Shan

Introduction

In Long-term Care (LTC) Plan 2.0, the Taiwanese government built several integrated dementia care centers. Integrated dementia care center is a service platform providing case management for dementia people. The purpose of this study is to describe and analyze data in the integrated dementia care center of a tertiary medical center in northern Taiwan.

Purpose/Methods

This is a descriptive and observational study. Case manager in our integrated dementia care center is responsible for providing clinical evaluations, memory clinics referral, practice care, and consultation. A total of 635 subjects were collected between January 1, 2017, and November 30, 2019. They were diagnosed with having dementia by neurologists in Mackay Memorial Hospital. Chi-square test was used to compare the differences in dementia type and severity, identity of caregiver and types of LTC services subjects received.

Results

A majority of dementia patients are women (61.6%) with Alzheimer's disease (45.2%) and have very mild to mild dementia (73.6%). The majority of caregivers are subjects' children (62.2%), followed by the spouse (16.1%), and child-in-law (8.3%). Most of the patients (88.7%) received the referral and professionalized services. More than half of the patients (53.1%) received home-care or day-care services. Our center worked in collaboration with nearby six community-based dementia care centers and conduct Dementia Guardian Angels promotional seminars in communities.

Conclusions

Our Integrated Dementia Care Center helps patients diagnose dementia within 2 months, provides support for dementia caregiver at different stages of dementia, and provides information about referral services. We also gathers medical health care resource services and organizes activities in the community to raise public awareness for dementia.

Contact: WU wen-chun

Department of Neurology, MacKay Memorial Hospital
No. 45, Minsheng Rd., Tamsui District
New Taipei City,
mmh.6750@mmh.org.tw

Dementia Care Centre Linking Hospital Services to Community Services

FANG Chun-Kai, LIN Yuan-Chen, YAN Ting-Ju

Introduction

Most dementia patients live in communities but get medical care in general hospitals in Taiwan. In long-term care system, community services are initial care for dementia patients and family. By Taipei City Government authorized, MacKay Memorial Hospital build up Dementia Care Center to link hospital services to community services.

Purpose/Methods

Case managers collected and assessed needs of dementia patients and family in psychiatric outpatient clinics. The Dementia Care Center (DCC) in Hospital transferred dementia patients to four local Dementia Care Bases (DCB) in communities. The DCC not only transferred dementia patients to the DCBs but also trained the health providers in the DCBs.

Results

In 2019, there were 294 dementia patients found by the DCC, including 192 (65.78%) were new diagnosed. 293 patients completed the assessment in the beginning, and 84 patients successfully transferred the DCBs with evaluated by the EuroQoL-5D and Chinese Caregiver Burden Inventory (CCBI). The pre-test and post-test of the EuroQoL-5D and CCBI were not significant differences. The DCC provided 6 continued education lectures for DCBs, 3 communication meetings, and 1 training workshop for primary care providers.

Conclusions

Dementia Care Center in Medical Center provided transference and support was a functional and innovative trial in Taipei City. Not only providing diagnosis and pharmacotherapy, the DCC provided further services to communities.

Contact: FANG Chun-Kai
MacKay Memorial Hospital
chungkai.fang0415@gmail.com

Smile here-friendly service for the elderly close to the people

TSAI Chiung-Yao, LIAO Ling-Ling, LIU Ming-Jou, LIOU Wen-Chin

Introduction

The implementation of the age-friendly hospital service is a policy that ST. Joseph Hospital continues to actively promote. It is hoped that every elder can feel a warm atmosphere when entering the ST. Joseph Hospital. Therefore, it is necessary to select the photos that can show the spirit of "age-friendly, smile starting" as the representative of the guardian angel of age friendly in our hospital.

Purpose/Methods

A photo of a smiling expression at work taken by colleagues in ST. Joseph Hospital, and a warm greeting from a person in the moment of smile. The winners were selected through the judging mechanism and voting methods. In addition to the voting activities in the lobby of the hospital, the elders in nursing homes and day care were also actively invited to vote. A total of 545 people participated in the voting within one week.

Results

The judges are divided into 60% popularity, 20% shooting skills, and 30% heart-warming words. A total of 13 colleagues participated in the contest. Popular voting be conducted from November 5th to November 11th. The top three winners have heart-warming words: "You smile and I smile to make the world a better place", "Put down the heart, smile, everything at ease", "Love in heart, smile to welcome people".

Conclusions

Under the ravages of the pandemic of covid-19, people must wear masks when they enter medical institutions. Because of the deterioration of vision and hearing of the elderly, sometimes the staff may misunderstand because of the mask's cover and can't see the expression or hear clearly. The main purpose of this activity is to remind everyone that the smile under the mask is still indispensable, and the friendly service for the elderly will not be impaired due to the epidemic.

Contact: TSAI CHIUNG YAO
St. Joseph Hospital, Kaohsiung, Taiwan
mlana2291@gmail.com

The concept of four aids used in the dementia community based service in Derain center

TSAI Chia-Jung, LIAO Ling-Ling, LIU Ming-Jou, LIOU Wen-Chin

Introduction

ST. Joseph Hospital Community Service in Zuoying Derain Center focuses on elders of dementia and their caregivers. The services for dementia include cognitive promotion programs and alleviation of dementia progress services. As for their caregivers, there are several services such as family support groups, nursing care trainings and safety visits. The center also continues to integrate courses and systems with the concepts of self-help, mutual assistance, physical assistance, and professional assistance for the elders of dementia and caregivers.

Purpose/Methods

In order to maintain long-term life function of dementia cases, both the cases and their caregivers adhere to the concept of self-help, mutual assistance, physical assistance and professional assistance in curriculum design and environmental facilities, so as to reduce the anxiety of deterioration of dementia and improve the quality of life of elders and their caregivers.

Results

The results of caregiver satisfaction and client attendance rate are high satisfaction, low attrition rate and high attendance rate.

Conclusions

Through the center operating process, employees adhere to the concept of "Four assistances", implement cognitive courses, plan group (including elders and caregivers) trips, performances of elders and caregivers, and strive to achieve the goal of self-sufficiency in learning, allowing all elders, caregivers in Derain center to get the best care and promote the improvement of family life quality.

Contact: TSAI CHIUNG YAO

St. Joseph Hospital, Kaohsiung, Taiwan

minana2291@gmail.com

Diversified services for families with dementia

FANG Chun-Kai, YAN Ting-Ju

Introduction

The Division of Geriatric Psychiatry of MacKay Memorial Hospital has been collecting cases of dementia families in outpatient clinics since 2018, providing professional consultation and caring visits of dementia professional teams to the home. The case manager evaluates the needs of the client in the clinic to improve the caregiver's home care skills and quality of life.

Purpose/Methods

Since 2018, MacKay Memorial Hospital has undertaken a plan for the care and management of dementia cases of the Taipei City Government Health Bureau. From June 2018 to December 2019, outpatient admissions were conducted for dementia families living in Taipei City. Information was collected through outpatient physician referrals, psychologist interviews, and time of inviting care visits. In accordance with the caregiver's care request, invite a nursing therapist, functional therapist, psychologist, or personal supervisor to arrange family care and professional consultation.

Results

A total of 68 cases were filed between 2018 and 2019, including 19 men and 49 women. Provided 66 consultations in outpatient consultation services, a total of 127 telephone care visits, and 70 family visits.

Conclusions

Dementia case managements and services are mainly referred by outpatients, and an outpatient and telephone care visit will be provided by a personal administrator according to the needs of the case. For families with difficulties in caring for their families, a professional team will arrange family care visits.

Contact: FANG Chun-Kai

MacKay Memorial Hospital

chunkai.fang0415@gmail.com

Discussion on the Effectiveness of Dementia Community Service

FANG Chun-Kai, YAN Ting-Ju

Introduction

The Division of Geriatric Psychiatry of MacKay Memorial Hospital has been undertaking the "Dementia Care Service Plan-Establishing Dementia Community Service Bases" in 2015 by the Ministry of Health and Welfare, and established a dementia community base in Tamsui District, New Taipei. A community-based long-term care service designed for families with mild and moderate patients of dementia. The dementia base establishes a link between medical care and community resources.

Purpose/Methods

Dementia Service Base handled group services three days a week. These groups were diverse cognitive promotion groups designed by functional therapists, psychologists and social workers for cases of dementia. In addition, care courses and family support groups were planned for families of dementia. The case managers assessed the needs of families with dementia, understood the family support system and psychological load status, collected the cognitive status and life experience of cases of dementia, and arranged the type of group suitable for the case to provide individualized resource intervention.

Results

From 2015 to 2019, the Dementia Care Base served 92 groups of dementia families. Since 2013, we have handled 613 cases of dementia awareness promotion groups and provided 6,788 service visits; conducted 55 courses of care for family members of dementia, a total of 522 service visits, and 88 family support groups and 507 service visits of family members.

Conclusions

The results showed that the integration of resources of medical and community organizations in dementia sites was effective, helping dementia caregivers to obtain wheezing services and psychological support, and that dementia cases were also socially satisfying.

Contact: FANG Chun-Kai

MacKay Memorial Hospital

chunkai.fang0415@gmail.com

The Influence of Animal-Assisted Therapy on physical, behavioral and socio-emotional functioning of elderly with dementia

SHIH Shu-Ling

Introduction

Dementia represents mental and economic burdens for both patients and their caregivers. However, there aren't any medicines that can cure dementia or slow it down. Previous research shows that Animal-assisted therapy(AAT) is a effectiveness that can arouse feelings of pleasure and happiness

in people with dementia. Therefore, this research has attempted to understand the effects of animal assisted therapy on elderly patients with dementia through behavioral and psychological symptoms. This research was to evaluate a canine animal assisted therapy program using in the elderly with dementia in long-term care facilities in Taiwan.

Purpose/Methods

The cohort comprised 12 elderly patients with dementia from one of the long-term care facilities in Taoyuan, Taiwan. All participants joined once per week for 1.5 hour in a group program, which lasted for 6 consecutive weeks. The design of Animal-assisted therapy programs mainly focuses on enhancing physical, behavioral and socio-emotional functioning. Data was collected by using structured observation Scale. After collection, data were encoded, decoded, and entered into SPSS 20 statistical software package for analysis. Descriptive and inferential statistical analyses follow. The significant level was set at .05.

Results

The data was completely collected from 12 elderly patients. The average age is 85.75 ± 6.78 . Among them, male is 7 (58.33) and female is 5 (41.67%). The result confirms that after AAT intervention, there were significant changes on enhancing physical, behavioral and socio-emotional functioning ($P < 0.05$). This research supports the effectiveness of AAT in the practical care of elderly dementia patients.

Conclusions

We offer another choice to improve the physical and mental health for elderly patients with dementia.

Contact: SHIH Shu-Ling

Cheng Hsin General Hospital
lingyang0224@yahoo.com.tw

Senior Health Literacy - Board Games for Dementia Prevention

CHEN Yu-Ting, WU Pei-Shuang, HSU Hung-Yi

Introduction

Tungs' Taichung MetroHarbor Hospital focusing on promoting the elderly's health literacy in 2019. The Hospital integrates the content of health education into the concept of "board games," and develops a board game for the prevention of dementia. It is hoped that seniors' health literacy can be bolstered through the "anti-dementia board game" teaching material, and that they can apply what they have learned into daily life to prevent and delay the occurrence of dementia/disability.

Purpose/Methods

Based on the theme of the prevention of dementia, the mechanism of "Board games for seniors - dementia prevention activity development and board game design workshop" was integrated to develop three sets of board games, namely, "Mediterranean diet fun game," "Happy holidays" and "Home safety." The events mainly included warm-up, stress-relieving activities and food fun games, in which the elders were taught the Mediterranean diet habits to prevent dementia and enhance their health literacy.

Results

According to the statistics of the progress rate in the pretest and posttest before and after the board games, it is found that the game for the prevention of dementia can effectively heighten the health literacy of the elderly. The overall correct answer rate increased from 66.22% to 92.38%, and the progress rate was 26.16%, reaching the original goal, and the expected progress rate was more than 20%.

Conclusions

The hospital develops board game sets for the prevention of dementia, which has made a breakthrough in health education and promotion, and is the first to develop a board game for seniors' health literacy, to increase their motivation of learning disease knowledge and be active aging in place, and heighten their health awareness.

Contact: WU Pei-Shuang

Tungs' Taichung MetroHarbor Hospital
bigpanzi122003@gmail.com

Traditional Chinese Medicine for Dementia

WU Yi-Chen, JAU Pin-Yu

Introduction

Recently it has begun to understand the effectiveness of Traditional Chinese Medicine (TCM) in the treatment of dementia. The goals of TCM treatment for dementia include delaying degeneration, maintaining cognition, and alleviating emotions etc. Owing to the general use of TCM in Asia, we would like to understand more information about the use of TCM and the cumulative days in patients with dementia of our hospital.

Purpose/Methods

It is a retrospective, cross-sectional study. We conduct the data of Linsen Chinese Medicine and Kunming Branch, which is the branch mainly focus on the western medicine and TCM integrated treatment. The data include the demographic profile, the list of TCM used by the patient of dementia, the days of using TCM etc. during 2016-2018.

Results

A total of 623 visits, and 52 people were involved. The ratio of male and female was 46.2% to 53.8% with an average age of 78.4 ± 10.7 . The average range of cumulative days is 161.9 ± 155.4 days. The major classes of TCM use are bu-yang class and an-shen class, which Yi-chi-tsung-ming-tang and Polygala are the most common prescriptions. It has no significant found between cumulative days between patients whether they use of psychotropic TCM or gastrointestinal TCM medications.

Conclusions

This study could not provide the analysis of curative effects due to the design of the study. However, we hope the conclusion and relevant of cumulative days for patient of dementia can provide information of long term use of TCM for the management field and the clinical use.

Contact: WU Yi-Chen

Taipei City Hospital, Heping-Fuyou Branch
1520wu@gmail.com

Preliminary Study on the Effectiveness of horticultural Activities in the Elderly with Institutional Dementia(BPSD)

WANG Yu-Hung, CHANG Yuanmay, YANG Hsin-Mei, HOU Yu-Hsueh, TSENG Yueh-Pei, YAO Wen-Chen, LIN Ching-Feng, LUO Jiing-Chyuan, LI Ling-May

Introduction

Elderly people with dementia (BPSD) who suffer from memory loss, due to forgetfulness, disorientation, judgment disorders induced anxiety, disorderly victimization, mental stress, etc., inappropriate care and limited ability to care for their families, demented elders are forced to leave their familiar home environment at the end of their lives, and negative emotional fluctuations such as stress, panic, helplessness, and sadness cause noise, anger or apathy.

Purpose/Methods

Horticultural activities increase social interaction and emotional stability for elderly people with dementia (BPSD). Using observational performance and recording methods, from January 1, 2018 to November 30, 2019 in the nursing home affiliated to the North Taiwan Hospital, a total of 11 cases, once a month, one hour each time, a total of 23 horticultural activities, include succulents plants 3 times, seeds 7 times, vegetables 3 times, flower arrangements 5 times and embossing 5 times.

Results

Engage family with the elderly through horticultural activities. The average age was 85 years old, the male-to-female ratio was 3:8, 8 were moderately demented, 3 were neurotic disorders and 242 person-times (attendance rate: 95.6%). From the third week of the event, there were 237 person-times who were emotionally stable and no noisy; Due to increased interaction and familiarity, their indifferent expressions turned into happy laughter after the fifth week of the event.

Conclusions

Horticultural activities increase the opportunities for the elderly and their families to participate and interact, feel the satisfaction of "love and be loved", increase the social interaction between the elderly, and endless processes for plants, making the elderly with dementia happy and emotionally stable. It provides the elderly with a safe and comfortable familiar environment, physical assessment, professional team care and meets the five main needs of Maslow.

Contact: LIN Ching-feng

Keelung Hospital Ministry of Health and Welfare
chingfeng01@gmail.com

Oral Function Training as Intervention for Dysphagia in an Elderly Nursing Home Resident with Infarct Dementia: A Case Study

YANG Hsinju, WANG Ya-Hui, HUANG Kui-Chen

Introduction

Dysphagia is a common occurrence in the elderly during the process of aging. Oral function training that has been reported to improve masticatory muscle strength helps prevent and postpone the occurrence of dysphagia among the elderly. The study aimed at assessing the efficacy of before-meal oral function training as an intervention for dysphagia in a 77-year-old female nursing home resident.

Purpose/Methods

The case study focused on an elderly female nursing home resident with infarct dementia experiencing three previous episodes of partial dysphagia. The patient received a 12-week oral function training lasting from January 7 to April 1, 2021. Neck, facial, cheek, and tongue muscle-strengthening exercises, swallowing exercise, speech exercise, and salivary gland massage were performed 10 minutes prior to the three daily meals. EAT-10 (Eating Assessment Tool) was used for clinical record and efficacy evaluation.

Results

Results of the intervention indicated that, after the 12-week oral function training, the EAT-10 score of the patient went down from 19 to 15 points with improvement observed in swallowing liquids and solids and experiencing coughing while eating. In addition, there was no episode of dysphagia during the entire course of the intervention.

Conclusions

Oral function training proves to be an effective intervention helping patients improve their oral functions, reduce risks of dysphagia, coughing, and aspiration pneumonia, thereby enhancing both physical and mental well-being.

Contact: HSINJU Yang

Tsaotun Psychiatric Center
hsinruyang@gmail.com

Physical fitness program intervention for Elder with Mild Dementia

LIU Huoy-In, WU Siou-Fang, CHANG Mei Chi, TSAI Wen-Ling, HUNG Yun-Hsiu

Introduction

Taiwan's elder population hits 3.80 million, about 16.2% of the total population in 2021. On average, one out of every ten people belongs to the aging group. There're about 7.78% of the dementia elderly in Taoyuan. Dementia Prevention is the

important issue in community. The purpose of this study is to application of physical fitness program for mild dementia elderly to increase the physical & psychological function.

Purpose/Methods

Main target: those aged over 65 interested in physical fitness program in the elderly (AD-8 > 2). We are expected to hold a total of 12-week training session on physical fitness program. Each class was 60 minutes in duration and once per week for three consecutive months. 19 mild dementia elders were included. Before and after the class, we conducted checkup on their body functions (including body mass index, percentage of fat mass, static balance, agility, upper and lower body strength, upper extremity flexibility and cardiorespiratory endurance, etc.), observe attendance rate, do the pretest and posttest on their ADL, IADL & AD-8 to evaluate their physical & psychological function. We used the point card system to promote attendance.

Results

After intervention, attendance rate: 95%, Increased to 1.5 times the same period last year, Compared with other courses to improved the muscular endurance and cardiovascular function. All participants were no significant differences in ADL & IADL, also psychological and cognitive function (AD-8) before and after treatment with no significant difference.

Conclusions

Research reveals the following (1) Progress the physical fitness program on mild dementia elderly is helpful on improving the muscular endurance and cardiovascular function. (2) The operation programs of physical fitness program on mild dementia are developed from the research are contributory on promoting of dementia activities into Taiwan's elder programs.

Contact: LIOU Huoy-in

Taiwan Landseed Hospital

hil7667@gmail.com

Poster Session 20: Mental health

The stress, self-efficacy, coping strategies and related factors among nursing students in the psychiatric units

WU Tsai-Chin, CHANG Chiu-Rung, TU Yu-Lin, WANG Mei-Hua

Introduction

For nursing students, the first internship in psychiatric ward is challenging, unpredictable and uncontrollable strange environment, so it is easy to cause different levels of stressors, emotional reactions and behavioral manifestations. levels of stressors, emotional reactions and behavioral manifestations. The purpose of this study was to explore stress, self-efficacy, coping strategies and factors of nursing students in psychiatric practice.

Purpose/Methods

A cross-sectional sample was taken from the psychiatric ward of a psychiatric hospital in the south of China. 145 students were enrolled in the study. Data were collected using the structural questionnaire "internship stress scale", "self-efficacy scale" and "coping strategy scale".

Results

The main practice pressure of nursing students comes from the aspects of "actual nursing patient pressure" and "homework and workload pressure". There was a significant difference in self-efficacy between the sexes. The frequency of coping with stress was moderate, and the most commonly used coping strategies were "shifting", "problem solving" and "staying optimistic". Correlation results: Self-efficacy of psychiatric nursing students was negatively correlated with practice stress; Self-efficacy is positively correlated with coping strategies. Internship stress was negatively correlated with coping strategies.

Conclusions

The relationship among internship stress, self-efficacy and coping strategies is interdependent, and self-efficacy is the most important variable. The higher the degree of internship stress, the lower the score of self-efficacy, which will indirectly affect the individual's behavior, and the frequency of adopting avoidance coping strategies will increase.

Contact: WU Sai-Chin

Kaohsiung Municipal Kai-Syuan Psychiatric Hospital

s7231@yahoo.com.tw

Discussing perfusion of hope in the process of empathy training for psychiatric nurses

CHEN Shu-Fen, LU Huei-Lan

Introduction

Empathy means that healthcare professionals can understand the patient's internal experience, feelings and ideas from the perspective of the patient, so that the patient feels understood. This study explores the ideas of psychiatric nurses on perfusion of hope.

Purpose/Methods

The research subjects sampled intentionally. 28 nurses who volunteered to participate in empathy training groups at a psychiatric hospital in southern Taiwan were taken from January to April 2019. A total of 8 sessions. In data collection, leaders in the group use broad and open statements to stimulate members' inner feelings and ideas, guide group members to interact and talk with others autonomously; then summarize the problems that members develop from the situation, and explore various issues. The experience and events facing the topic are inextricable. In the group process, two observers actually recorded the member interaction process and important conversation content. The data analysis reflects the members' special phenomena, the concept analysis and interpretation of the actual presentation data, and the different psychological and emotional responses of the members.

Results

The nurses are self-aware and perfusion of hope in the group, and express their emotions through the situation. After eight times empathy trainings, the data are summarized. The nurses believe that in the face of the pressure of life, they will be persistent after making up their own decisions, accounting for 80%. If you fail, you will work harder, if you don't do what you want, if you try to reach the meeting, if you are bored, you will continue to the end.

Conclusions

Psychiatric nurses are very sensitive to their own perceptions and reactions to other people's behaviors, and they can often analyze their own and other people's behaviors and problems. Frequent clinical work contacts with patients, psychiatric patients often feel emotionally full and think they need Being concerned about, the tension between the nurses and nurses affects the working atmosphere. Through the research process of grounded theory, it is possible to analyze and explore the meaning and value of nursing work in more depth.

Comments

Nursing staff often need to face the anxiety, violence and negative emotions of psychiatric patients. The intervention plan of this study allows the nursing staff to express their work emotions, transform stress-based thinking, and increase positive energy in the face of work and life. It is helpful for health promotion of medical staff and patients. Nurses recognize that it is important for their own life to perfusion of hope.

Contact: SHU-FEN Chen

Jianan Psychiatric Center

freda@mail.cnpc.gov.tw

Kollegiale Hilfe (KoHi): Mental first aid provided by colleagues at Clinic Hietzing, Vienna

ABLÖSCHER Miriam, HUF Wolfgang

Introduction

The term "second victim" refers to a health care worker who becomes traumatized by being involved in an adverse event during patient care. Unexpected critical events in the context of clinical routine, like medical errors, sudden death or violence, can traumatize the involved employees and cause serious mental health problems, in the worst case even suicide. Therefore, it is essential to quickly support health care workers after critical events.

Purpose/Methods

In order to do so, a mental peer support network at the Viennese hospital Clinic Hietzing is being built. Since May 2019 more than 110 employees have been trained in mental first aid and successfully supported their colleagues after critical events in more than 20 cases.

Results

"Collegial help" (Kollegiale Hilfe - KoHi) uses the benefits of mental peer support. Second victims reported feeling less nervous and emotionally released after talking to a trained colleague. They regained control over the situation and capability of acting. The collegial helpers reported not to feel

stressed at all or barely stressed right after giving support. If necessary, they are offered supervision to debrief stressful activities. Furthermore, regularly organized network meetings afford an opportunity to reflect their engagements and support the development of the system.

Conclusions

Since the COVID-19 crisis, strengthening the mental resilience of health care workers has become even more important. The collegial help offers even in this field quick and helpful basic support after critical events. Overall, it is an advisable addition to professional crisis intervention in hospitals.

Contact: ABLOESCHER Miriam

Vienna Healthcare Group - Clinic Hietzing

miriam.abloescher@gesundheitsverbund.at

Quality of Life in Elderly with Depressive Disorder

TU Yu-Lin, CHEN Shu-Jane, CHANG Chiu-Jung, WU Tsai-Chin, LU Mei-Jou

Introduction

To compare the quality of life (QOL) between elderly with depressive disorder and control subjects.

Purpose/Methods

The cross-sectional study included 40 outpatients from mental hospital with DSM-IV-defined depressive disorder, aged 60 and over, and 44 control subjects with comparable socio-demographic characteristics but no history of psychiatric disorders. A variety of measures including the Taiwanese brief version of the World Health Organization Quality of Life (WHOQOL-BREF) Instrument, Taiwan Geriatric Depression Scale, Mini-Mental State Examination, Activities of Daily Living and Chinese Health Questionnaire were compared between these two groups. The correlations between QOL and other measures were identified.

Results

A significantly greater number of physical diseases ($p < 0.001$), more severe depression ($p < 0.001$), lower QOL ($p < 0.001$) score, and lower instrumental activities of daily living (IADL, $p < 0.05$) score were noted in patients with depressive disorder than in controls. In the depression group, depression severity was negatively correlated with four domains of the WHOQOL-BREF ($p < 0.005$, $p < 0.001$, $p < 0.05$, $p < 0.001$) and IADL ($p < 0.005$) scores. Scores on three of the four domains of the WHOQOL-BREF (physical, $p < 0.05$; social, $p < 0.05$; environmental, $p < 0.05$) were positively correlated with IADL score. In the control group, depression severity alone was negatively correlated with four domains of the WHOQOL-BREF ($p < 0.001$, $p < 0.001$, $p < 0.001$, $p < 0.005$).

Conclusions

Depression severity is associated with QOL.

Contact: TU Yu-Lin

Kaohsiung Municipal Kai-Syuan Psychiatric Hospital

yulin41022@hotmail.com.tw

Depression symptom mediates the relationship between quality of life and disability among people older than 65 years

YU Sheng-Tsung, CHANG Hsing-Yi, LIN Yu-Hsuan

Introduction

Among older people, the quality of life would be lower in those with disability than those without. The aim of this study was to investigate if there was mediating effect of depression on the relationship between quality of life and disability.

Purpose/Methods

Data for this study came from the 2017 National Health Survey (NHIS) in Taiwan. The 10-item CES-D was used to evaluate the depression symptom, the Washington group SS was used to assess disability, and EQ-5D 5L was used for quality of life. People were divided by sex and age 65-74, 75-84, and 85 and above.

Results

There were 2906 individuals completed the survey. The average EQ-5D score was 0.8659. Those reported any disability in visual, hearing, mobility, communication, concentration, and self-care had lower score than those without. The scores were even lower among those reported depression symptom, and became worse in the disable with depression symptom. In regression analysis, the relationship between disability and EQ-5D was established. Once, depression symptom was added in the model the relationship between EQ-5D and disability was weekend.

Conclusions

Depression symptom might mediate the relationship between quality of life and disability in older individuals. Attention should be given to those with depression symptom.

Contact: YU Sheng-Tsung

National Health Research Institute, Taiwan
yu650911@nhri.edu.tw

Not only for suicide prevention but also for health promotion of seniors- The upgrade BHC-5L program

FANG Chun-Kai, HSIAO Hsueh-Wen

Introduction

The BHC-5L (being happiness catchers- looking, listening, learning, loving, and living), a public primary suicide prevention program, has been developed in New Taipei City since 2010 for all ages. High suicide mortality and mental illness of older people both are public health problems. For efficient public health promotion for seniors, we designed an upgrade BHC-5L program to enhance health literacy of suicide prevention, depression, dementia, and delirium of older people to the public.

Purpose/Methods

In 2019, MacKay Suicide Prevention Center (MacKay SPC) were authorized by New Taipei Government to develop the standard teaching materials of the upgrade BHC-5L, to train the facilitators, and to practice. MacKay SPC modified the primary BHC-5L teaching materials in order to suit the old people, and to plus the contents of depression, dementia, and delirium. Then, MacKay SPC trained the facilitators to familiar with the new teaching materials. The qualified facilitators gave 1-hour lectures to the three subgroups: public old people, primary caregivers of old people, and professional caregivers of old people.

Results

For training the facilitators, there were 59 participants to join the 4-day training workshop initially, but only 36 passed the test. However, only 50% passers (n=18) were ready to give lectures. For the public lectures, there were 39 sessions and 2,129 audiences for public old people; there were 28 sessions and 1,144 audiences for primary caregivers of old people; and there were 5 sessions and 330 audiences for professional caregivers of old people. All audiences of three subgroups had higher post-test scores than pre-test after the lectures.

Conclusions

The upgrade BHC-5L program for seniors constructed the comprehensive health promotion from three different dimensions involving old people themselves, primary caregiver, and professional caregivers. The mode was a kind of compassionate community and worth to popularize.

Contact: FANG Chun-Kai

MacKay Memorial Hospital
chunkai.fang0415@gmail.com

The use of emotional blackmail among university student couples: An investigation by attachment styles

CHEN Pin-Jung, KU Yung-Li

Introduction

Building romantic relationships is important for university students, and many complex emotions are involved in love. When individuals are unable to deal with the negative emotions, they make their partners submit by discomfiting them through threats. The present paper investigates the use of emotional blackmail among university students by their attachment styles.

Purpose/Methods

Data from 100 participants who have been in a romantic relationship were collected by conducting a questionnaire survey with the Attachment Style Scale and a self-designed Emotional Blackmail Scale as research tools, and analyzed using the Pearson correlation coefficient.

Results

Females (58%) account for a larger proportion of the subjects, and the mean age is 21.7. The results show a significant negative relationship between emotional blackmail and secure ($r = -.289$, $p = .004$) and dismissing ($r = -.167$, $p = .0096$) attachment styles, and a significant positive relationship between emotional

blackmail and anxious ($r = .335$, $p = .001$) and avoidant ($r = .216$, $p = .031$) attachment styles.

Conclusions

Research reveals that the higher the scores of secure and dismissing attachment styles, the lower the use of emotional blackmail, and high scorers of these two styles are almost never blackmailed; and the higher the scores of anxious and avoidant attachment styles, the greater the use of emotional blackmail.

Contact: LIN LI-EN

Bali Psychiatric Center, Ministry of Health and Welfare
rainny660096@gmail.com

Discussion on The Factors Related to Self-injury of Female Crisis Intensive Center of Psychiatric Hospital

CHANG Hsin-Fei, YANG Wen-Chen, LIAO Wan-Yu, HUNG Yi-Ning, SU Ching-Chun, CHANG CHIEN Yu-Chen

Introduction

This study intends to explore the general situation of a psychiatric patient's self-injury, in order to prevent and control the incidence, and to improve the ability of nursing staff to respond to patient safety risk factors.

Purpose/Methods

Using retrospective research and investigation method, statistical analysis of self-injury incidents reported by women's intensive care unit in a psychiatric hospital from January to December 2020.

Results

Mental disorders were diagnosed as schizophrenia (47.1%), followed by affective psychosis (32.4%); the average age was 29.3 years old, with the most in 20-29 years old (61.4%), followed by 40-49 years old (18.2%), 30-39 years old (13.6%), under 20 years old (6.8%). There were 44 self-injury incidents in total. The cause of self-injury was unresolved (61.4%), affected by illness (27.3%), poor communication (6.8%), and others (4.5%). The patient's diagnosis, age, coping skills were significantly related to self-injury ($P < .05$).

Conclusions

If psychiatric nurses can detect and intervene early, the possibility or severity of self-injury in hospitalized patients will be reduced. This study shows that the relevant influencing factors of self-injury events are meaningful in predicting self-injury events in psychiatric hospitals. This allows nursing staff to understand the characteristics of mental patients and provide medical units with reference to how to strengthen nursing staff's patient safety-related care skills. Reduce the occurrence of abnormal events and construct a safe medical workplace.

Contact: CHANG Hsin-Fei

Kaohsiung Municipal Kai-Syuan Psychiatric Hospital
a0985736340@gmail.com

A Pilot Study of Horticultural Therapy for Psychiatric Patients and Its Effectiveness on Patients' Confidence and Stress Relief

LIN Yi-Jhen, LI Pei-Shan, LU Huei-Lan, WU Wen-Cheng

Introduction

This study aims to boost psychiatric patients' achievement and relieve their pressure by means of horticultural therapy.

Purpose/Methods

Ten psychiatric patients are included in a closed group. Eight horticultural therapy courses are given on a weekly basis. In the process of group psychotherapy, therapeutic factors as well as horticultural concepts are introduced, in order that patients learn how to grow and take care of plants creatively. The goal of the treatment is to enhance the patients' confidence and relieve them of stress. The tools for the study include therapeutic factor records, satisfaction inventory, feeling faces and self-assertion index. The results are analyzed so that the plan of the group psychotherapy can be modified, and the effectiveness of horticultural therapy can be increased.

Results

After eight horticultural therapy courses, it is found that firstly, the group satisfaction increases from 60% to 95.3%. Secondly, the score of a smiling face rises from 5.3 to 8.9 while that of a frowning face drops from 8.7 to 2. Thirdly, the score of self-assertion rises from 42% to 86%. Positive feedbacks are observed in the qualitative questionnaires. For example, some participants make the following statements: "I gain a sense of achievement as I reap the harvest of the plants I grow." "Watering the plants gives me a good mood." "I like the horticultural therapy group because it makes me relaxed." Better still, the group leader also feels the support and encouragement among members. Through hands-on plant growing experience and sharing, the confidence of the participants are elevated and their pressure is reduced.

Conclusions

The horticultural group psychotherapy promotes the patients' participation, sharpens their senses, and boosts their confidence. Overall, horticultural therapy is both physically and mentally conducive to psychiatric patients. Their progress also serves as an improvement of psychiatric nursing care.

Contact: LU Huei-Lan

Jianan Psychiatric Center, MOHW
14404@mail.cnpc.gov.tw

Short-term intensive aerobic exercise improves cognitive function and mood of mental disorders

LEE Chia-Ying, HUNG Pin Chen, WANG Ching Ying, CHEN Jin-Shuen

Introduction

Chronic mental patients are affected by the course of the disease, their cognitive function is degraded, especially in attention, memory and executive function defects are quite obvious. Many studies have confirmed that cognitive impairment is the core problem of mental disorders, especially the impairment of cognitive elements such as visual perception space, executive function and memory function. Many studies have also pointed out that exercise intervention has a positive effect on the cognition, and emotional symptoms of people with mental illness.

Purpose/Methods

There were 10 patient with mental disorders, aerobic exercise activities are led by occupational therapists and are conducted three times a week for a total of six exercise sessions. Before and after the activity monitoring the heartbeat every time. The patient assessed his cognitive function and emotional state 2 days after the end of the 6 weeks of activity the week before the exercise. including 1. WAIS-IV: Executive function (Symbol Search+Symbol Replacement) 2. RCFT: Visuospatial Structure Concept, Visuospatial Memory 3 BDI Aerobic exercise At the beginning of each exercise, there will be 10-15 minutes of warm-up, followed by 20-30 minutes of aerobic exercise. Take a 10-minute break, repeat 20-30 minutes of aerobic exercise.

Results

Executive function pre-test average score=91.5, post-test average score= 86.8. RCFT: copy trial score the pre-test average score=30.25, post-test average score=32.25; Immediate recall trial pre-test average score= 9.95, post-test average score=16.35; delay recall trial pre-test average score= 8.55, post-test average score= 16. BDI pre-test average score=8.6, post-test average score=5.9

Conclusions

After intervention, there was a significant increase in visual perception spatial concept and visual perception spatial memory. There was a slight improvement in depression symptoms, and there was no significant change in working memory and processing speed. The study found that planning 20-30 exercise activities can promote the concept of visual perception space and visual perception spatial memory ability of mental disorders in a short period of time.

Contact: LEE Chia Ying

lichaiyin@gmail.com

Stabilizing operation a new psychiatric sheltered workshop in general hospital.

FANG Chun-Kai

Introduction

A major barrier to employment for patients with mental disorders is limited access to supportive and non-discriminatory workplaces. In order to facilitate mental disabled persons back to the workplace, we open a new sheltered workshop in general hospital. The article presents how to set up a new sheltered workshop and to stabilize operation it.

Purpose/Methods

The sheltered workshop, 'Comfort Food' at Tamshui MacKay Memorial Hospital, was established officially in November 2016. The funds were provided from MacKay Memorial Hospital and Labor Affairs Department of New Taipei City Government. There were 1 career counselor and 6 sheltered employees. All products were developed and made by ourselves. Under hospital and government support and supervision, Comfort Food tried to stabilize operation and to attend the official evaluation and certification every year. We hope to increase employees' salaries and to approach stable operation.

Results

From 2016 to 2019, Comfort Food had 7 sheltered employees totally, and 1 employee successfully transferred to a general workplace. In 2019, the disable degree of 6 sheltered employees were 3 mild and 3 moderate disability. The annual average salaries of sheltered employees increased 55.44% comparing 2019 to 2018. The highest month salary was near NT\$ 18,000. The annual evaluation and certification by Labor Affairs Department of New Taipei City Government, Comfort Food was the second class in 2017 and 2018, but became the first class in 2019.

Conclusions

To open a new sheltered workshop is a difficult task but a valuable and meaningful services. Career rehabilitation at a sheltered workshop in a general hospital is very difficult. In Taiwan, there were only three medical centers having formal sheltered workshops. Comfort Food is the second sheltered workshop in our hospital. Our presentation wants to encourage the other general hospitals to create the career opportunity for patients with mental disorders.

Contact: FANG Chun-Kai

MacKay Memorial Hospital

chunkai.fang0415@gmail.com

The Family Structure of borderline personality disorder in the middle class of Taiwan society: three case studies from Bowen Family Systems Theory perspective

LEE Yi-Chen, CHEN Yu-Ching

Introduction

Many psychiatric specialists believe we are living in a Borderline Personality Disorder era. In our practice, cases have suggested that some borderline personality disorder cases in Taiwan didn't arise from lower-class, but rather in middle-class and wealthy families. Moreover, there are very few research findings regarding the family structures of borderline personality disorder cases in ethnic Chinese society; thus inspiring the thinking behind this research. This research utilizes Bowen Family Systems Theory to explore the effects of family Structures on Borderline Personality Disorder in three middle-class, ethnic Chinese families.

Purpose/Methods

This research uses the concepts 'differentiation of self' and 'relationship triangles' from Bowen Theory to explore the cases of three ethnic Chinese families.

Results

This research found similarities in the family dynamics of these three cases. 1. The relationships between the respective parents in each of these three cases are distanced and even hostile. 2. The patients of these three cases act as the emotional support roles for their mothers. The mothers have been acting as both father and mother because of the respective fathers' shortcomings. 3. These three primary caregivers are overprotective and do not allow the patient to have autonomy.

Conclusions

1. The parental relationships in these three cases are dissonant. The fathers are absent from their parental roles, so the relationship between the mothers and the respective children is one of symbiosis. The fusion between mother and child creates unhealthy relationship triangles. 2. The patients of these three cases didn't have a sense of self-identity and have fused with their mothers for a long time. They are not able to successfully achieve differentiation of self and are not able to have healthy interpersonal interactions. It is for these reasons that they have been diagnosed with Borderline Personality Disorder.

Contact: LEE Yi-Chen

Kaohsiung Medical University Chung-Ho Memorial Hospital
maryli1104@gmail.com

Exploring Effectiveness of Appointment Reminder Calls to Patients Just Discharged from an Acute Psychiatric Ward.

LIEN Kai-Hung, CHEN Hui-Chen, CHEN Su-Zu, WU Wei-Hsin, LIN Ching-Feng, LUO Jiing-Chyuan, LI Ling-May

Introduction

This study explores the effectiveness of appointment reminder calls to patients just discharged from an acute psychiatric ward. Given the unstable medical treatment of psychiatric patients, hospital designed appointment reminder calls to patients. For reducing the re-admissions, patients with different diagnoses could improve their compliance with medical treatment through the social worker's reminder calls.

Purpose/Methods

It's a content analysis and retrospective study, using the database of discharged patients from the acute psychiatric ward from 2019 to 2020. The database was set up by a registered nurse to fill out the patient's status, and the social worker provided appointment reminder calls and documented the service results. The social worker would give a call to remind patients to return to the hospital or make an appointment. 486 patients were tracked in this study.

Results

The highest rate of return by first appointment reminder calls was affective psychosis (100.0%), schizophrenia (91.1%), substance use (90.5%), organic mental disorders (89.9%), dementia (86.7%), the lowest is others (60.6%). The regular return rate for three appointments was 65.6% (48.6% to 65.6%). The highest was dementia and the lowest was others. Compared with the 60-day re-admission rate, after the appointment reminder call interventions, the re-admission had a statistically significant reduction. (12.8% to 3.0%)

Conclusions

The research results show that the appointment reminder calls by social workers after discharge can reduce the short-term re-admission rate. When patients whose condition is stable returns to the hospital more intensively after discharge, their compliance with medical treatment is better. In addition, the diagnosis would be a different type on the rate of return. Compared with the past, the rate of return was on the increase.

Contact: LIN Ching-feng

Keelung Hospital Ministry of Health and Welfare
chingfeng01@gmail.com

The Effects of Post-discharge Follow-up Care to Raise the First Revisit Rate of Psychiatric Patients: A Pilot Study

WANG Wei-Chen, LU Huei-Lan, CHENG Ching-Ming, WU Win-Cheng

Introduction

This study explores the effects of a case manager and post-discharge follow-up care on the first revisit rate of psychiatric patients.

Purpose/Methods

The subjects of the study are 490 discharged patients from a psychiatric center in southern Taiwan. The filtering criteria are: 1. Involuntary hospitalization, 2. BVC (Bröset Violence Checklist) score higher than 3, 3. Against-advise discharge, 4. Unscheduled re-hospitalization within 14 days, 5. Hospitalization for the first time, 6. Repetitive hospitalization, and 7. Living in solitude. Discharged patients matching any of the above mentioned filtering criteria are included in the study. The post-discharge follow-up care is employed to integrate patients into their communities. Telephone call interventions are implemented to on the 3rd and 7th day after discharge. Telephone calls aim to remind the patients to take medicine regularly and provide them with health education. Caring phone calls are made more frequently for the high-risk cases. The phone call interviews are transcribed into records for further data analysis.

Results

After implementing post-discharge follow-up care for a year, it is found that the revisit rate increased from 75% to 94.8%, and the discharge care satisfaction rate rose from 82.5% to 93.8%. Positive feedbacks were observed in the qualitative questionnaires, like "it's nice that someone reminds me to make a return visit." "My family members can inquire how to take care of patients" "I start to feel the benefits of taking medicine regularly." The case manager also found that there was a surge of revisit rate and that the patients had more confidence in medical care, which implied there was a positive effect of post-discharge follow-up care on the enhancement of medical quality.

Conclusions

The implementation of post-discharge follow-up care can raise the first revisit rate and discharge satisfaction care. The telephone call care administered by case managers can alleviate family members' burdens, and remove the stigmatization of psychiatric patients. As a result, the revolving door syndrome is avoided and the medical cost is lowered. Better still, this approach facilitates the patients' adaptation to communities, and creates a win-win situation for the medical staff and the patient.

Contact: LU Huei-Lan

Jianan Psychiatric Center, MOHW

14404@mail.cnpc.gov.tw

Using hand-made art therapy to improve the emotional distress of patients undergoing chemotherapy

LEE Chia-Jung, CHUNG Wen-Jean, JANG Jie-Yun, TZOU Rung-Huei, CHIOU Chou-Ping

Introduction

Chemotherapy is the main treatment option for cancer patients, and patients often feel worried about the uncertainty of treatment and the caused side effects. Clinically, it is observed that patients are always indifferent and lack interest in things around them. The unit used questionnaires to conduct surveys and found that 67% of cancer patients have moderate or severe emotional distress. The purpose of this study is to reduce the emotional distress of cancer patients undergoing chemotherapy.

Purpose/Methods

An one group experimental research design and convenience sampling were used. The research subjects were recruited from patients in the cancer unit of a teaching hospital. The reasons of cancer patients have moderate or severe emotional distress are: anticipatory worry, chemotherapy side effects, unfamiliar treatment environment, etc. The task group made solution process from March 16 to August 31, 2020: 1. teaching patients hand-made art therapy activities, 2. before performing chemotherapy, referring patients for environmental introduction and nursing guidance, 3. establishing cross-team collaboration work mode, 4. transforming the treatment environment, 5. setting up an electronic calling system, and 6. creating a care line group.

Results

After the implementation of the above improvement measures, the post-evaluation found that the rate of patients with moderate to severe emotional distress decreased from 67% to 13%, which effectively reduces the emotional distress of cancer patients undergoing chemotherapy, which is beneficial to the quality of life of patients.

Conclusions

It is recommended to extend this project experience to other tumor wards to improve the quality of cancer care.

Contact: LEE Chia Jung

E-DA Cancer Hospital

ed100067@edah.org.tw

The Methods to Decrease the Incidence of Falls in a Psychiatric Center

FANG Szu-Ting, LU Huei-Lan, CHENG Ching-Ming, WU Wen-Cheng

Introduction

Fall often are the top of accident in psychiatric acute wards. Particularly, fall rate and injury degree of patients in acute wards

increase gradually. Data showed that fall incident rate was 53.83% and falls injury rate was 48.07% in acute wards in the psychiatric center Southern Taiwan since January to December, 2019. Therefore, this study expects to reduce fall rate and injury effectively by intervening prevention measures with teamwork and then to promote medical care quality and to preserve patient safety.

Purpose/Methods

This study analyzed the cause and factor of falls which included: (1) patients' health factor was 30.52%; (2) environment factor was 28.6% (3) insufficient education training was 16.88%; (4) drug factor was 18.8%; (5) other factor was 5.2%. The fall prevention intervention through the professional, these strategies included (1) Increasing patient's cognition of fall prevention measures, and provided muscular strength training ;(2)Established friendly environment for fall prevention. ;(3) Strengthening fall prevention education and designing multilingual guardian list for caregivers. (4) Emphasized medication safety: assessing medication for high fall risk patients to ensure medication safety. (5) Designing protective hood and vest.

Results

The result showed that the average fall rate decreased from 53.83% to 49.0%, the average fall injury degree decreased from 48.07% to 39.74% in 2020 . The data revealed that the intervention strategies improved the fall incident and fall injury effectively.

Conclusions

After quality control circle and intervening prevention measures with teamwork, the fall rate and injury degree of patient in psychiatric acute wards revealed obvious improvement. However, we still have to keep follow up to maintain patients' safety.

Contact: LU Huei-Lan

Jianan Psychiatric Center, MOHW

14404@mail.cnpc.gov.tw

The Effectiveness of Applying Maslow Hierarchy Theory to Establish Self-management in Psychiatric Rehabilitation Wards

KAO Ching-Wen, TSENG Yu-Kuei, LU Huei-Lan, WU Wen-Cheng

Introduction

The purpose of this study was to explore the effectiveness of applying Maslow's hierarchy of needs theory in the psychiatric rehabilitation ward. Safety needs focus on healthy management and problem solving ability, love and belonging needs to hear their inner voice through the group discussion, esteem needs to learn financial planning and held their own conference. Innovative measures plan to meet self-realization needs, learn to be their own masters to solve daily life problems, and to move towards community recovery.

Purpose/Methods

106 chronic psychiatric patients were invited to join the program during Dec. 2018 to Sept. 2019, patients were encourage to create a family-based therapeutic environment them-self, managed their health and problem solving independently, patients share their goals and rehabilitation plans together. Learn financial planning and management to meet the needs of psychology, individuals and society. Nurses applied group skills to guide patients learn effective problem-solving methods. The questionnaire used to understand the effectiveness of patients after participating in this group.

Results

Studies have showed that the number of praises from patients reaches 62, which is higher than last year. The results of the satisfaction of simulation clinic revealed that the patient enhanced the ability to find problems, the satisfaction level was 75%. The satisfaction result of the family autonomous meeting increased from 73% to 78%, and the degree of satisfaction of the self-management of money was 91%.

Conclusions

Applying Maslow's hierarchy of needs theory to the psychiatric rehabilitation ward, and through the multiple intervention could create a mutually supportive, inclusive and empowering treatment simulation community environment, and promote the preparation of patients with mental disorders to return to the community life in the future , improve their problem-solving ability, maintain self-health, promote early integration with society, and enable individuals to have an independent life with normalized and autonomous management, thereby improving their quality of life.

Contact: LU Huei-Lan

Jianan Psychiatric Center, MOHW

14404@mail.cnpc.gov.tw

A Preliminary Study on the Status of Schizophrenia Outpatient Comorbid Metabolic Syndromes: A Case Study of a Psychiatric Hospital

LEE Mei-Hung, CHANG Shu-Min, TASI Yu-Chun, LU Huei-Lan

Introduction

The purpose of this study was to explore the prevalence of schizophrenia comorbid metabolic syndrome through a medical service model for outpatients department.

Purpose/Methods

2026 subjects were the psychiatric outpatient in a psychiatric center southern of Taiwan, a total of 845 cases were returned for follow-up from March to October 2019. For those who have not scheduled a blood test for more than one year, a physician evaluates and sets up a project to assist in completing the examination, and provide disease consultation on an individual basis.

Results

172 cases of schizophrenia can be cooperating with the examination, and the execution rate is 21%. It was found that there were 102 people with hyperlipidemia, 56 people with hyperglycemia, and 52 people with metabolic syndrome (30.2%). Interviews with these metabolic syndromes are conducted on case management diseases, to understand the individual living habits, and to provide diseases, diet and exercise. After health education, 37 people (71.2%) were willing to change their bad living habits, such as reducing food consumption, drinking beverages, quitting smoking and increasing physical activity.

Conclusions

Due to the chronicity of schizophrenia, self-care ability is gradually degraded, and the bad living habits are likely to cause obesity. In addition, the long-term use of antipsychotic drugs reduces the day activity and may cause the risk of metabolic abnormalities. Therefore, outpatient clinics promote the health promotion care mode for mental disorders. With the concept of case management and annual health checkup, regular physical examinations and the use of supportive nursing education are provided to help cases correct their bad habits and learn correct health behaviors to promote good health life style.

Contact: LU Huei-Lan

Jianan Psychiatric Center, MOHW
14404@mail.cnpc.gov.tw

Effect of Game Therapy Group on Patients' Negative Symptoms in a Chronic Psychiatric Ward in Taiwan

ZHUANG Fu-Ann, CHANG Yu-Ho, MA Cheng-Yea, CHANG Chien-Hsin

Introduction

Chronic mental patients have residual negative symptoms and show minimal response to, and interaction with, external stimuli. The average length of hospital stay of patients (mean age 49 years) in our ward is 4.9 years; the patients are already showing signs of deterioration. Therefore, we applied game therapy group activity as an intervention to explore its effect on improving the negative symptoms of hospitalized patients.

Purpose/Methods

An implementation strategy was designed according to the practical guidelines for game therapy and the demands of the patients. The intervention measures included: 1. Drawing up the content for the game therapy group after collecting the patients' game preferences; 2. Designing the game tools, and rules; 3. Designing a poster to help patients understand the situation of participating in game therapy activities. Data were collected by evaluating the negative symptom part of the Brief Psychiatric Rating Scale and the Mini-Mental State Examination; data were verified by paired t-test.

Results

From March 2020 to December 2020, 62 hospitalized patients participated in the activity. The improvement rate of the negative symptom was 39%, and that of the Mini-Mental State Examination was 23%.

Conclusions

This game therapy tool was designed based on the familiar and favorite elements of the local patients, which greatly improved the participation, thereby improving the negative symptoms and cognitive ability of patients. Moreover, through competition and cooperation, the interpersonal interaction among patients was enhanced, which also virtually improved the poverty of thought and enhanced speech richness.

Contact: LIN LI-EN

Bali Psychiatric Center, Ministry of Health and Welfare
rainny660096@gmail.com

Emotionally Focused Couples Therapy applied to the treatment of foreign marriage problems

HSIUNG Hsiao Ching

Introduction

Foreign marriages are often difficult to adapt to due to culture, lifestyle, children's education, financial pressure, etc. The use of family therapy becomes an important solution to improve the marriage relationship. Emotionally Focused Therapy (EFT) has been found to increase marital relationships and satisfaction. The purpose of this study is to analyze the effectiveness of EFT in improving foreign marriage relationships.

Purpose/Methods

The study applied EFT to a French-Chinese couple. The husband was unable to work due to his anxiety disorder, and the wife was frustrated by her husband's constant criticism of her words and actions. The relationship was reduced to a freezing point by the sustained conflict on the husband's emotional demands. The couple participated in eight sessions of EFT therapy.

Results

The therapist uses guidance and consultation in attachment desire for the couple. The husband explored that he had not had the experience of being a child dependent on his parents and that he had placed his attachment desire on his wife, and request a strong emotional feedback attachment to her. Therefore, the husband increases communication with his spouse instead of emotional attachment demands. The wife began to accept the husband's emotional needs.

Conclusions

Emotional attachment is a basic human need. Even foreign couples from different countries and has heterogeneous cultures still have a common need for emotional connection. EFT helps couples to accept each other's attachment needs and desires on a deeper level feel for security. Helping couples to effectively improve interaction patterns, reduced negative emotions, and rebuild intimate connections.

Contact: HSIUNG HsiaoChing

Taiwan Adventist Hospital
hiimhiawzefng@gmail.com

The Efficacy of Sleep Hygiene Education on Dealing with the Sleep Disorder in Psychiatric Patients

CHEN Shu-Yi

Introduction

The study explores the efficacy of sleep hygiene education on eliminating sleep disorder in acute psychiatric patients.

Purpose/Methods

The subjects of the study are inpatients of a psychiatric acute ward in the interval from February to December 2019. "Patient Observation Checklist", "Vital Sign Recording", and interviews serve as the research data. After data analysis, it is found that 71% of the participants complain about insomnia. 44.2% of the inpatients sleep less than 6 hours. Those who suffering from sleep disruption account for 48.3%. The following five strategies are formulated based on the sleep hygiene education. First, keep regular hours, and daily time for bed is fixed. Second, create comfortable sleeping environment, and reduce the interference of noise. Third, improve sleeping quality by cutting down on caffeinated beverages like coffee or tea. Fourth, practice one-hour relaxation with the psychologist once every week. Fifth, discuss the effects with the primary nurse so that the strategy can be adjusted. Last but not least, the medical team evaluates the inpatients' sleeping states to modify the education mode.

Results

After the implementation of these strategies, the percentage of inpatients suffering from insomnia dropped from 71% to 35.1%. The percentage of inpatients who sleep less than six hours went from 44.2% to 28.7%. The percentage of inpatients troubled by sleep disruption fell from 48.3% to 15.5%.

Conclusions

Slumber regulates human's emotional behavior and cognitive memory. After a good night's sleep, inpatients recover from fatigue and enhance their immune system. Apart from medication, the sleep hygiene education helps improve the inpatients' sleeping quality so that their health is sustained.

Contact: LU Huei-Lan

Jianan Psychiatric Center, MOHW
14404@mail.cnpcc.gov.tw

Building Resilience through a Christian Fellowship group: An exploratory study on occupational therapy intervention for individuals with Mental Illnesses

KAO Ting, CHEN Shu-Ping, LU Huei-Lan

Introduction

Current studies show that spiritual activity can contribute to mental health resilience and well-being. However, evidence is scarce on use of spirituality as a therapeutic component in occupational therapy. This study aims to understand the

effectiveness of a Christian Fellowship group on recovery and spiritual well-being for individuals with mental illnesses.

Purpose/Methods

8 inpatients were recruited from a Psychiatric Center in Taiwan to participate in a Christian Fellowship group once a week for 3 months, starting in October, 2019. Each session included a 15-minute Praise and Worship, a 30-minute Bible Study and sharing, and a 15-minute Chatting and Prayer for Needs. Assessments, including the Stages of Recovery Scale, Spiritual Well-Being Scale, were administered before and after the intervention.

Results

Results showed that the participants' the Stages of Recovery Scale scores had no significant differences ($p=.398$) between before and after the intervention. However, Spiritual Well-Being Scale scores showed the trend of improvement ($p=.051$). Spiritual well-being of the participant was better after the intervention. In the individual interviews, they pointed out that they experienced satisfaction from the group, felt peace and power, and hope to continue the sessions.

Conclusions

This study highlights spirituality is an important component in therapy and successful implementation of this Fellowship group demonstrates the possible changing mechanism of resilience. However, the sample size of the study is too small, which could be improved for further research.

Contact: LU Huei-Lan

Jianan Psychiatric Center, MOHW
14404@mail.cnpcc.gov.tw

The investigate of family Caregiver burden during care adults disability family: a network meta-analysis

PAN Hsiu-Fang, TSENG Tzu-Wei, WU Mei-Chuan

Introduction

According to statistics from the Ministry of the Interior, R.O.C. Adult disability live in their homes, 65% of them are taken care of by family. Usually goes beyond the physical and psychological abilities of family caregivers and becomes a source of chronic stress, and become a care burden for family caregivers. The burden will be reduce the quality of care. Changes in health, tiredness, depression, and reduced leisure activities, worsen the quality of life on family caregivers.

Purpose/Methods

Searched of PubMed, Proquest, Cochrane Library, Medline and CEPIS for the qualitative studies of the investigate of family Caregiver burden during care adults disability family. Using the Joanna Briggs Institute (JBI) evaluation tool. Presenting a qualitative literature review with evidence.

Results

Selected on the 7 documents, the research results were analyzed in an integrated manner, showing the experience of family

caregivers in discussing the psychological burden of family caregivers for disabled family patient.

Conclusions

Most of the family caregivers are experiencing fatigue, lack of sleep, headache or gastrointestinal discomfort, and worsening of their conscious health status. If the family caregiver has the opportunity to be relieved, this caregiver burden can be relieved. The results of this study, that the physical stressors of the family caregivers are because of the long-term care of the adults disability family and feel the changes in physical health.

Comments

Providing appropriate support groups can help family caregivers adjust to social and emotional segregation and coordinate externally to seek support to help reduce the load of care. Recommended of community and hospital cooperation to set up a caregiver support group to provide stress management and skills. Can provide respite services, home attendants and other related information to reduce the burden of family caregivers.

Contact: HSU Jason

Chang Bing Show Chwan Memorial Hospital
showchd@gmail.com

Psychiatric Daytime Inpatient Cases Use Outcome Works to Improve Self-Efficacy

**LIN Jia-Mei, CHEN Shu-Fen, LU Huei-Lan,
WU Wen-Cheng**

Introduction

Psychiatric cases are weak in social participation, life care and work ability, and lack of social connections. In this study, the four aspects of social self-trust, self-management, social adaptation, and mutual support of day-inpatients were involved in the four aspects of the intervention plan, and the study explored the relationship between social self-trust, social participation, and social adaptation of day-inpatients in a psychiatric hospital in southern China. Results.

Purpose/Methods

Collected from September to December 2019 in a psychiatric hospital in southern Taiwan to participate in daytime inpatients, 20 cases in the experimental group and 20 cases in the control group, 87.5% of the diagnosed schizophrenia, 12.5% of the affective disorder, research tools Based on Amagai et al. (2012), the mental case social participation self-efficacy scale, published in participating works, the experimental group participated in the training content: woodworking, painting, gardening, dessert making, musical instrument performance, dance and singing.

Results

It was found that the scores of the experimental group were significantly different before and after the self-trust, social adaptation, and mutual support training. I was valuable to the society. I was tired or nervous and able to get along with others. When I had difficulty, I could use social resources and others would accept me. The score increased by 20%. Received praise from the public during the training, increased sense of

accomplishment, willing to share works with others, and improved self-ability.

Conclusions

Combining training with results works, allowing cases to participate in multiple activities, show creativity, enhance personal capabilities, complete works with others, promote them in achievements exhibitions, promote individual social participation and sense of self-fulfillment, and integrate social resource contexts as the basis for returning to the community, Promote social participation and self-management capabilities, achieve the best functions of individuals and society, and implement the spirit of community rehabilitation and medical care.

Contact: LU Huei-Lan

Jiannan Psychiatric Center, MOHW
14404@mail.cnpc.gov.tw

Explore the Physiology and Psychology effects of self-care training groups used in Psychiatric Day Care Service

**TSAI Ya-Ping, CHEN Shu-Fen, LU Huei-Lan,
WU Wen-Cheng**

Introduction

Interpersonal relationship and self-care ability of psychiatric cases will decrease during the onset of illness. This study is to explore the physiological and psychological effects of self-care training groups in psychiatric day hospitalization cases.

Purpose/Methods

Taking a case of day stay in a psychiatric hospital in the south, 20 cases of self-care personal hygiene and clothing grooming skills were selected based on intentional sampling. Demographic analysis age: 31-40 years old accounted for 55%, 41-50 years old accounted for 32 %, diagnosis: schizophrenia accounts for 67%. The group is a homogenous, semi-structured closed group, conducted 12 times from July to September 2019. The process includes: telling the methods and difficulties of self-care, the impact on life, and the impact on interpersonal interaction, And provide methods and guidance; discussions, sharing, demonstrations, situational exercises and role-plays are conducted in each group. The research tool uses a self-developed structured questionnaire to evaluate the effectiveness of the case-participating groups, and the results use the SPSS18.0 software descriptive statistics percentage frequency distribution for data analysis.

Results

The results of the study found that the physiological level: "I don't think I have any peculiar smell", which increased by 25% from 20% to 45%; the psychological level: "I think that the appearance of clothes is neat and clean, which can bring me closer to others and have a good Popularity" increased by 30% from 25% to 55%; "I think maintaining a neat and clean appearance can make me feel good", which increased by 15% from 25% to 40%.

Conclusions

During the whole group training process, the attendance rate reached 91%. This training has positive effects in promoting the interpersonal relationship of the case, enhancing the ability of self-care, enhancing self-confidence, and maintaining the quality of life. It is hoped that such group training can be widely used in the clinical field of psychiatry in the future.

Contact: LU Huei-Lan

Jianan Psychiatric Center, MOHW

14404@mail.cnpc.gov.tw

The Effect of applying Horticultural Group Therapy for Chronic Psychiatric Patients

TASI Shu-Fen, LU Huei-Lan, WU Wen-Cheng

Introduction

This study intervened by horticultural therapy group to explore the influence and therapy effect for the positive and negative mental symptoms of chronic psychiatric patients

Purpose/Methods

10 male patients in chronic psychiatric ward, who were diagnosed with schizophrenia and had positive and negative mental symptoms, volunteered to participate in the group therapy. Structural horticultural therapy, one hour once a week, proceeded 24 times. The therapy contained: knowing the methods and steps of planting, learning the skill of weeding and manuring, observing the growth process of plants, sharing the harvests, and reviewing the memories of horticultural group. This study measured by horticultural therapy benefits scale and assessed brief mental symptoms before and after the group therapy to explore the difference

Results

The attendance rate was 99%. The result showed: 1. The total average efficiency of horticultural therapy increased from 2 to 3.7. The insignificant item in order was feeling sense of accomplishment, having good interpersonal relationship, expressing emotion effectively, and horticultural cultivating skill; 2. The total average score of brief psychiatric rating scale reduced from 2.4 to 1.2. The insignificant item in order was emotional retardation, hallucination and noncooperation in interview

Conclusions

Patients showed consideration for surrounding by taking care plants, improved the influence of life which caused by positive and negative mental symptoms and promoted their horticultural skill and self-sense of accomplishment. Therefore this study suggested to provide horticultural therapy in chronic psychiatric ward to promote patients' physical and mental health

Contact: LU Huei-Lan

Jianan Psychiatric Center, MOHW

14404@mail.cnpc.gov.tw

The Effects of Drawing in Enhancing Well-Being for People with Mental Illness

HUANG Wen-Yi, CHEN Chih-Yin, LU Huei-Lan

Introduction

People with mental illness in the southern Taiwan psychiatric hospital have negative symptoms, such as avolition, blunted affect, and asociality. Therefore, as occupational therapists, we designed a series drawing programs, guiding participants draw their life stories, and encouraged them to introduce themselves to each other through their drawings. Through expressing the content of their drawings, they not only increased the frequency of interpersonal interactions, but also shared good memories and felt happiness. This study examined the effects of sharing of positive experiences through drawing to enhancing the well-being for people with mental illness

Purpose/Methods

27 participants with mental illness were recruited from the psychiatric center in Taiwan. Participants received the drawing programs as occupational therapy. The themes of the drawings were based on positive experiences, such as my favorite food, what I am proud of, and my good friend, once weekly in 90 minutes a session for 12 weeks. Occupational therapists encouraged participants to share their drawings with others, through telling their stories, they expressed feelings and recalled good memories, which increased self-expression and interaction with others, also enhanced their happiness. We measured well-being for people with mental illness through The World Health Organization- Five Well-Being Index (WHO-5). Paired t-tests was used to analyze the data.

Results

The results showed that people with mental illness who participated in drawing group had significantly better well-being ($p < 0.02$)

Conclusions

Our findings suggested that clinicians could encourage people with mental illness to draw, through expressed their drawings, shared their good memories, showed out their confidence and then developed a positive sense of self, and enhanced the well-being at last.

Contact: LU Huei-Lan

Jianan Psychiatric Center, MOHW

14404@mail.cnpc.gov.tw

Applying the art for company to the group of emotional self-care of liver transplantation patients

YANG Li-Min, CHUNG Chia-Ju, CHIH Hsu-Ching, TSAI Li-Li

Introduction

When a liver transplant person has a good understanding of the caring cognition, attitudes and techniques of the self determination of health, the will access the better conditions of psychological and social adaptation. This program focuses mainly on the emotional care and is believed that at the time of the liver transplant patient accepts the positive emotional care, the patient's capability of self-determination of health care in other aspects will be promoted consequently.

Purpose/Methods

The purpose of the program aims to lead the group members to know and to be aware of the emotions and also learn how to identify the emotions and transform the negative feelings and consequently to strengthen the capability of caring mental health. The program with a mode of group social work binding with the art of company, and using the test of emotion assessment and the seven observation records made within group works for the assessment tools.

Results

The study demonstrates that:(1) the scores in emotions were shown a trend of stabilization or slight increase in the members joined in each activity(2) The members' experiences and feelings are reminded and connected consequently, that makes the capabilities of expressiveness and speaking are boosted, and creates opportunities to initiate greater in-depth mutual interactions among the members.(3) The members accessed the opportunities to earn positive recognition and social participation by joining in the Organ Donation Promotional Activity

Conclusions

Arts Therapy provides an opportunity for persons to communicate and express in non-verbal languages. The realization of artworks enables the member to directly notice the whole content want to express and also provides a function to repeatedly review and check on one's self which kept the procedures of self-dialogue and awareness occurring. It is suggested to hold the group with art for company continually, which is owed to help the self-growing and the emotional connection for the group members.

Contact: LI-MIN Yang

Mackay Memorial Hospital

limin.a065@mmh.org.tw

Poster Session 21: Healthy workplace

The efficacy of employee health promotion program - An Example of a Regional Teaching Hospital in Southern Taiwan

CHIU Kuei-Fen

Introduction

(1) Understand the differences in lifestyle habits and health beliefs of employees in the workplace before and after the intervention of the program; (2) Understand whether the employees in the workplace have improved their awareness of health promotion and whether they have developed good health behaviors after the implementation of the health promotion program; (3) Understand whether the employees in the workplace have improved in their physiological indicators after the implementation of the health promotion plan.

Purpose/Methods

The structured questionnaire used in this study collects data on the subjects' living habits, health beliefs and health assessment. By issuing questionnaires during the annual health check of employees, the basic data of the research subjects (age, daily sleep hours, exercise habits, eating habits), living habits (smoking, drinking, and medication), the distribution of health beliefs of the research subjects, and the physiological measurement values of the research subjects. The distribution situation, perform the calculation of descriptive statistical values.

Results

Discuss the life habits of the research subjects, and discuss the health beliefs of the research subjects, the impact of diseases on the life of the research subjects, the reasons why the subjects reduce their health promotion behaviors, the research' health promotion behaviors on their quality of life and research Subjects obtain health knowledge channels and the external reasons that encourage them to engage in regular exercise, and finally analyze the physiological indicators of the subject's health examination.

Conclusions

It is hoped that the results of this research will be helpful for medical institutions to formulate and promote health promotion strategies, and relevant authorities for policy reference.

Contact: CHIU GUEI FEN

Management Department

0870023@GMAIL.COM

Effectiveness of employee health promotion activities : An example of Kaohsiung Municipal Cijin Hospital

WU Wen Chuan

Introduction

There is an obesity rate of 39.2% that is from workplace employees according to Health Promotion Administration information. "Healthy weight loss" in the workplace is currently a health policy actively promoted by the National Health Administration of the Ministry of Health and Welfare. There is an obesity rate of 40.9% found from the analysis of employee health checkups of hospital in 2019. The hospital is located at island which across Kaohsiung city. Most of the employees came from the urban area of Kaohsiung across the sea. It took a long traveling time for commuting every day that led to no time to exercise and prepare correct healthy meals when they off duty. It shown the hospital employees were facing a health crisis of overweight and obesity.

Purpose/Methods

2020 Love Motion Love Health program: 12-weeks physical fitness and yoga courses, 60 minutes each time. The hospital would like to encourage employees to participate in healthy exercises. Participants send watch pedometers employees at any time convenient to monitor and record their own body weight changes. Regularly handle weight loss seminars and provide healthy meal. Making competition held in healthy eating. Set up full attendance and various reward systems. In Body composition at pre-test and post-test. Paired Sample t-test.

Results

39 people signed up, 32 people participated in the whole process, reaching 82.1%; 5 males (15.6%), 27 females (84.4%), average age 39.2±8.2, 7 people with excessive body mass index (21.9%), paired sample T test, body weight ($p < 0.001$), body mass index ($p < 0.001$), fat percentage ($p < 0.05$) body and visceral fat area ($p < 0.05$) are of significant decline, although the rate of abdominal obesity.

Conclusions

Employee's mental and physical are able to obtain relax by cutting down working time which means reduce work load. The most of employees are willing to participate the exercise joyfully. Total 60 minutes (Hospital put into 30 minutes and employees dedicate 30 minutes) that effectively improve the weight of employees.

Contact: WEN CHUAN Wu
Department of Long Term Care
1083001@kmuh.org.tw

Healthy workplace satisfaction among residents-a survey in a southern area hospital

CHOU Chien-Chi, CHEN Li-Jyn, CHEN Chang-Hung, CHIOU Han-Wei

Introduction

Since residents have the dual role as learners and medical caregivers, duly increase manpower for duty and reasonable working hours are helpful for clinical training, working atmosphere, medical quality and patient safety. Compared with medical centers, it is difficult for regional hospitals to recruit internal medicine residents. With complementary measures, increase temp manpower for flexible shifts, we found that residents have positive feedback and satisfaction in 2018 than 2017 and we can keep operating this mode in other departments.

Purpose/Methods

There were 168 objectives in 2017 and 180 in 2018. In 2018, we added one resident for care manpower and cut one shift from 6-7 to 5-6 monthly than in 2017. Moreover, preceptors provided clinical guide and quarterly counseling for residents with the ratio one to one.

Results

The effectiveness was shown by significant improvements in the residents' workload, duty amount and working pressure ($p < .000$). The average of satisfaction on workload, duty amount and working pressure increased 0.2 in 2018 than 2017, working atmosphere which includes team cooperation, communication channels and relationship with colleagues grew 0.6, self-development which included on-the-job training self-growth went up 0.4. (Likert scale)

Conclusions

This two-year research showed through increasing manpower and arranging reasonable working hours, residents had positive feedback and satisfaction on job descriptions, working atmosphere and self-development. Besides quantity, quarterly counselling was affirmed. We'll keep operating this mode and seek improvements.

Contact: CHOU CHIEN CHI
Tainan Municipal Hospital
bosmin110@gmail.com

Using Abandoned Partition to Improve Nursing Staff Needlestick Safety and Prevention: Example of Chaiyi Christian Hospital

SU Antony, LIAO Chieh-Wen

Introduction

According to Taiwan's Exposure Prevention Information Network (EPINet) 2004. The needlesticks injuries are one of the most hazardous and dangerous occupational injury. The nursing staff

is on the top of the high risk. The nursing staffs exposed in patients with hepatitis B or C. and are high risk of hematological infection while having a needlestick injury. Based upon the Root-Cause-Analysis report from needlestick injury reports archive, we found that removing needlestick from infusion hose is the major causes of injury with potential risk factors for the nursing staff.

Purpose/Methods

Before the improvement, the nursing staffs unloaded the syringe needle by direct cutting the syringe needle from the infusion hose to a disposable tank and may cause the injuries. Through team discussion and experiments, we adapted abandoned metal board, and modeled the paper cutting machine design, creating a metal blockade between the infusion hose and the syringe needle to prevent the staff from cutting injuries and reducing the risk of acquiring infection from processing the biomedical waste.

Results

After the improvement till 2020, there was no syringe needle-cutting injury incident occurred, compared with the 4 incidents in 2012. Besides, the nursing productivity had also improved in terms of less medical waste disposal processing time and spared more time in caring patients.

Conclusions

Adopting safety protection devices can effectively prevent the occurrence of needlestick injuries. Besides, the nursing managers also need to be more careful in eliminating or minimizing the occupational exposure of the staff in processing the syringe disposal, as well as the injury prevention education, injury reporting and the knowledge of post-injury responses in order to provide a safer occupational environment.

Contact: LEE Pei Hsuan

DITMANSON MEDICAL FOUNDATION CHIA-YI CHRISTIAN HOSPITAL

cych13199@gmail.com

Orienteering in Hospital ~ Innovative Activities of Hospital Parade

HOU Jung-Ying, CHANG Li-Chen, CHEN Wei, LIN Yuan-Wei

Introduction

There are more than 3,000 employees in the hospital. However, employees' worksites are spread across more than 200 departments in two different regions. Employees have proposed to the Health Promotion Hospital Committee that a large number of employees and worksites are scattered in different regions, which has led to gradual alienation of employee relationships. To make employees know each other and practice health promotion, we hold a creative health promotion program, which integrated health promotion and workplace acquaintance.

Purpose/Methods

Encouraging the staff to get to know the different working departments in the hospital and to promote health, we hold a hospital tour with the theme of health promotion. According to the hospital building layout, participants by walking searched for the 20 marked departments and flags (checkpoints) and checked in. While finding the target department, participants read the

introduction of the department. The event was planned as a game similar to "hunting treasure".

Results

There are 352 participants to attend the hospital tour and 299 of them completed the tasks, and the completion rate was 85%. Participants participated in health promotion programs in the lunch break or after work. However, 96% of participants were satisfied with the program. 97% of participants expressed to be more familiar with the workplace in the hospital. In addition, 96% of the participants mentioned that they were able to guide people to the correct location.

Conclusions

The hospital tour is a highly cost-effective program. Employees invite other colleagues to participate in the event together, thereby increasing the relationship between them. Through reading the posters of 20 units of checkpoints provide employees with information about other departments in the hospital and increase their familiarity with the physical environment and walking routes in the hospital. We recommend that pre-job training programs to combine with this program, which is helpful for new employees to understand the workplace environment.

Contact: LEE Pei Hsuan

DITMANSON MEDICAL FOUNDATION CHIA-YI CHRISTIAN HOSPITAL

cych13199@gmail.com

Job Satisfaction in respect of Employees' Age and Rank - A Study of Certain Public Hospital in Taiwan

CHANG Chih-Ming, LIN Chun-Yu, HUANG Ming-Jen, YEN Chia-Chi

Introduction

It is expected to find out whether there is any variation between employees of different ages ("45 & under" or "46 & above") and ranks (supervisor or non-supervisor) in respect of satisfaction with "work and environment", "organizational atmosphere", "leadership control" and "appraisal and reward", which will be taken as the reference for staff health promotion policies of the hospital.

Purpose/Methods

Total 629 physicians, nurses, other medical staff and administrative staff of the hospital were investigated anonymously by using of the questionnaires with good reliability and validity. Two-way ANOVA was adopted to analyze whether there are significant differences between employees of different ages ("45-" or "46+") and at different ranks (supervisor or non-supervisor) in respect of satisfaction with "work and environment", "organizational atmosphere", "leadership control" and "appraisal and reward".

Results

204 valid questionnaires were collected and the analysis showed the average satisfactions in the four dimensions of employees at age 45- were all lower than those employees at age 46+. Especially the item of "appraisal and reward" suggested a significant variation ($p=.056$). And a further main effect analysis

indicated that the satisfaction scores of non-supervisors at age 46+ in respect of "organizational atmosphere" and "appraisal and reward" were significantly lower than those of supervisors at age 46+ ($p=.016$ & $p=.031$).

Conclusions

The result shows overall job satisfaction of employees at the lower age is less than those employees at the higher age and a significant difference appeared in terms of "appraisal and reward". A further analysis disclosed whether the employees are supervisors is the main factor of the gap, indicating the distribution of salaries and benefits is unreasonable for different ages and ranks, which even has affected the organizational atmosphere. This is a very important discovery.

Contact: CHANG Chih Ming

Kaohsiung Municipal Min-Sheng Hospital

psy7034@gmail.com

Creating a healthy workplace for professionals working in the ENT unit: Applying human factors engineering to decrease the work-related musculoskeletal damages and to improve work satisfaction

CHIANG Chia-Chi

Introduction

Reasonable ergonomic design is essential to ensure a healthy and friendly environment for healthcare professionals working in the health promotion hospitals. The traditional double-sided ENT treatment tables easily made the users suffering from repetitive limb strain and work related musculoskeletal damage (WRMD). The purposes of this study were to apply human factors engineering on the ENT treatment facilities to decrease the WRMD and to improve job satisfaction for healthcare workers

Purpose/Methods

An action research design was applied to comprehensively observe the process of the healthcare workers working by the traditional facilities and equipment. A multiple disciplinary team was established to recruit the ENT doctors, nurses, as well as technicians from the Medical Engineering department. Thirdly, review literature related to prevent WRMD was conducted. Fourthly, it was observed that 20 occasions daily to treat patients with the traditional ENT facilities. A noteworthy proportion of workers suffered from WRMD at various severity.

Results

The traditional work facilities and equipment were not designed according to the principles of human factors engineering so that the workers need to repeatedly bend over and stretch upper trunk to reach medicine, equipment and materials which often caused the workers developing WRMD symptoms, such as musculoskeletal injuries, soreness, and backache etc. The workers gave positive feedback on the newly-modified facilities and appreciated the human factor engineering design. After the transformation, the overall satisfaction increased from 50% to 98%.

Conclusions

An integrated multidisciplinary team can find unhealthy environment and to design new equipment to promote a healthy and safe hospital. The workers no longer bend over and stretch to get materials so that they can focus on the treatment, avoid possible mistakes, and reduce the potentials of contamination and infection. Reasonable ergonomic design can reduce WRMD and thereby ensuring occupational health, improving safety and satisfaction. It is critical to evaluate equipment with the principle of human factors engineering.

Contact: CHIANG chia-chi

008944@ntuh.gov.tw

Application of electronic medical records (EMR) to the health risk management of staffs exposed to antineoplastic hazardous drugs

LI Ping-I, CHU Chia-Hui

Introduction

Medical staffs, who providing antineoplastic hazardous drugs, may have the risks to their own health. They exposed to hazardous drugs in the air, or on work surfaces, and medical equipment. The organizations should implement a comprehensive prevention program to minimize occupational exposure. And organization should provide special health examinations for these staffs.

Purpose/Methods

In order to solving these problems, we implement the program which using the electronic medical record(EMR). We used the electronic medical records to identify them who had exposed to hazardous drugs. Because of the closed-loop medication, we recorded the medical staffs who had exposed to hazardous drugs. Including pharmacists, transport staffs, nurses and janitors. According to the exposed time and frequency, we identified the three levels of exposed risks. And we provide special health examinations for these working staffs.

Results

Before implement this program, Only the staffs who working in the oncology wards, could had special health examinations, once per year. After implement the this program, we identified all working staff into three groups. By the exposed time and frequency, we developed the risk management program. We separated all staffs into three groups, high risk/ medium risk/ low risk. According to the program, we provide different health examinations for each group. Additional, we also found the pharmacists, transport staffs, and janitors, they also needed the special health examinations.

Conclusions

The traditional survey of exposed to hazardous drugs was report by staffs. They usually forgot what they do in a year, not to mention the time or frequency of exposure. Therefore, we used electronic medical records to identify risk groups instead of traditional survey. After implement this program, we collected more detail information for health monitoring. And provided more special health examinations to our staffs.

Contact: CHU Chia-Hui
Cathay General Hospital
octopus704@gmail.com

Exploring the Impact to Establish a Healthy Lifestyle of Medical Workers on the Three-hypers

CHANG Chiao-Ling, LU Huei-Lan, CNEMG Ching-Ming, WU Wen-Cheng

Introduction

Due to the nature of work and shifts, psychiatric medical workers are under high workload pressure, so they are prone to produce negative emotions and exhaustion. They are also more likely to lack exercise habits due to fatigue, poor lifestyles are invisible killers for health. To establish a healthy lifestyle for improving health behaviors is important for medical worker. The purpose of this study was to exploring the Impact to establish a healthy lifestyle of medical workers on the three-hypers and then explore the effectiveness of their interventions.

Purpose/Methods

In this study, the research tools are physiological indicators of physical examinations, 328 employees who have completed health examination for two years, quantitative analysis and cross-contrast methods were used to analyze. Employees whose blood glucose ≥ 110 mg / dL, blood pressure $\geq 140/90$ mmHg, and triglyceride ≥ 130 mg / d received Individual occupation interviews and on-site services for high-risk persons are conducted. Exercise classes and stress relief activities were provided to help the workers with three-hypers to develop healthy lifestyle habits. The evaluation index of the research effectiveness was the results of "blood sugar", "blood pressure", and "triglyceride" which have been completed a health check for two consecutive years from 2018-2019.

Results

The results showed that three-hypers (blood pressure, blood sugar, and triglyceride) had a decrease of 1.22%, those with any two abnormalities had a decrease of 4.27%, and those with one abnormality had a decrease of 6.71%. The results show that through health self-awareness could help employees to establish a healthy lifestyle, regular exercise, stress relief activities and a healthy diet can effectively improve blood sugar, blood pressure, and triglyceride abnormalities, and improve their healthy behaviors and management.

Conclusions

To increase health literate, establish healthy lifestyles, develop exercise habits and find ways to express self-stress, which can effectively improve the data on hyperglycemia, hypertension, and triglycerides; the results of this study are expected to promote exercise motivation and health awareness, allow medical workers to increase physical activity and energy expenditure, could maintain the ideal body weight and reduce the three -hypers abnormal rate.

Contact: LU Huei-Lan
Jianan Psychiatric Center, MOHW
14404@mail.cnpc.gov.tw

The long term consequence and Influential Factors on Severity of Low Back Pain in Radiologists: A population-based retrospective cohort study

HUNG Bin-Cong, HSU Hua-Yin, TSENG Yuan-Tsung

Introduction

A complete investigative report on the occupational injuries and illnesses in radiologists is yet lacking. The previous studies had mostly been based on questionnaire surveys whose results were very much effects by the recall bias. We survey the National Health Insurance Research Database (NHIRD) in this study to conduct radiologists for occupational injuries and to conclude the time frame of initial occupational diseases.

Purpose/Methods

Using the Taiwan National Health Insurance claims data, information on a cohort of radiologists (n=442) between 2000 and 2013 was collected. A comparison cohort at a 1:10 ratio based on sex-, age-, and index year-matched persons with non-radiologists (n=4420) was selected from the same database. The disease was defined by the ICD-9-CM. Both cohorts were followed until the end of 2013 and the risks of occupational diseases were calculated.

Results

The treated and control cohorts were followed up for mean periods of 7.17 and 7.24 years and enrolled with the mean age 34.1 ± 8.3 years, 50.3% male, respectively. The results revealed an increase in Relative Risks (RR) of sleep disorder (1.16; 95% confidence interval [CI]: 0.93-1.45), Migraine (0.80; 95% CI: 0.53-1.22), Lower back pain (1.79; 95% CI: 1.35-2.39), Backache (2.19; 95% CI: 1.45-3.30) and Disc displacement (0.88; 95% CI: 0.88-1.21) in radiologists. Sleep disorder, Lower back pain, and Backache were found to have greater risks of subsequently being diagnosed than the comparison cohort after the index date.

Conclusions

While radiologists care for others on a daily basis, they are ignoring their own health and well-being. If long hours on your feet and repetitive tasks are causing back pain, then it's necessary to make policy to prevent it.

Contact: TSENG Yuan-Tsung

Tainan Municipal Hospital (Managed By Show Chwan Medical Care Corporation), Taiwan
b891040733@yahoo.com.tw

Discussion on the effectiveness of “Collecting points reward system” involved in employee health promotion activities

**HUANG Wei-Hsin, LEE Shu-Chen, LIANG
Li-Jen, HU Nai-Fang, CHEN Yu-Hua, CHEN
Chiu-Chen, CHANG Chia-Mei**

Introduction

Everyone spends more than one-third of the day in workplace, making workplace health promotion very important. We designed health promotion activities and revised the reward method for staff in the hospital based on the results of employees' health inspections and needs. We hope that through this system, each unit in the hospital forms a health promotion atmosphere, which will affect the health consciousness of each member of the hospital and achieve the concept of health hospital care for all employees.

Purpose/Methods

The program was implemented by inter-departmental integration in the hospital. Relevant units were invited to evaluate staff needs and activities proposed by past participants, including health management, regular exercise, creative activities and ergonomic self-improvement programs. Participants were required to fill in the pre- and post-activity assessments such as health status, exercise habits, dietary habits, and life style. In addition, points were given according to their participation. A higher point indicated more active participation and more chance to win awards.

Results

A total of 133 groups of 1,336 people were enrolled in this program with nursing staff as the main participants (44%). After intervention, there were improvements in self-conscious physical and mental health status of the participants. In terms of eating habits, participants improved by having fewer midnight snacks, fewer between-meal snacks, enhanced food labeling ability, and choosing more low-calorie food. Exercise habits, including time and intensity, increased as well. A total of 889 people lost weight in this program.

Conclusions

We found that employees have significantly improved their physical and mental health, dietary habits, and exercise habits. Future related health promotion activities can also apply this model to other workplaces and communities.

Contact: CHC mmh

Community Health Center, Mackay Memorial Hospital,
mmh1089@ms1.mmh.org.tw

Effects of Lifestyle Modification on Risk Factors for Metabolic Syndrome in Hospital staff

**FU Chao Yang, TSAI Chiung Man, HUANG
Shao Tsung, LIAO Lin Yu**

Introduction

Unhealthy lifestyles such as eating habits, food accessibility, and low physical activity can cause obesity. Obesity, race, diet, smoking, and lack of physical activity are significantly associated with metabolic syndrome. Studies confirmed that lifestyle interventions at least 150 minutes of physical activity per week and a low-calorie, low-fat diet to achieve 7% weight loss can significantly reduce the incidence of metabolic syndrome.

Purpose/Methods

This study was intended to understand the effects of lifestyle modification on risk factors for metabolic syndrome in hospital staff. The study applied a funny mode that "turnover-heart-move-reading 4 machine program". The program had four aspects, one of which for regular exercise, including lifestyle, knowledge, healthy exercises and relationship. Finally, 72 employees were enrolled voluntarily for the test Physical fitness and metabolic syndrome risk factors are measured.

Results

Before workplace promotion plan, there were 27 staff which abnormal waist circumference, 13 which abnormal blood pressure and 5 which abnormal blood glucose. After the workplace plan, the results showed that 24 staff which abnormal waist circumference, 10 which abnormal blood pressure and 2 which abnormal blood glucose. In addition, the results of physical fitness showed that male employees generally have poor body flexibility and muscular endurance, and female employees that body fat obese and poor cardiac endurance.

Conclusions

The risk factors of metabolic syndrome were different by lifestyle and diet. According to results, the lifestyle program significantly improved risk factors for metabolic syndrome in staff. In the future, try to consider the characteristics of work patterns and the degree of employee involvement. The importance of proper diet will be used as a reference for the hospital's staff care policy, and related activities will be designed to help staff self-health management.

Contact: CHAO YANG Fu

Chest Hospital, Ministry of Health and Welfare
tn50276@ccd.mohw.gov.tw

Exploring the Workplace Fatigue in Psychiatric Center in Taiwan

**GUNG Su-Fen, LU Huei-Lan, CHENG Ching-
Ming, WU Wen-Cheng**

Introduction

Fatigue caused by excessive workload is likely to increase the risk of employees' adverse reactions to their physical and mental

health, and endanger the safety of patients. The purpose of this study was to understand the workplace fatigue index of employees in psychiatric center southern of Taiwan. It is hoped that the research results could provide the reference for load and fatigue interventions to improve their workload.

Purpose/Methods

The questionnaires of "Overload Assessment Questionnaire" and the "Overwork Scale" were applied to assess workplace workers' overwork problems, which include-"personal overwork" and "work related overwork", to understand the workplace fatigue index of the staff of the hospital in 2018. This research questionnaire used SPSS version 22.0 statistical software, and uses chi-square test and binary logistic regression for comparative analysis.

Results

The research results showed that 96 employees (28.4%) have a severe index of employee fatigue in the personal overwork. The work-related overwork index was 93(27.5%) people with moderate to severe levels. Among the background factors, "gender", "age", "department", "senior age", "family history", and "life style" "Smoking", "meal time", "conscious lack of sleep", and "exercise habits" have statistical significance ($p < 0.05$). In addition, a binary logistic regression analysis was performed to explore the significant predictors related to fatigue: "sex", "age", "department", and "conscious lack of sleep", etc.

Conclusions

This research revealed that the nursing staff and administrative staff of hospital have higher work stress than other departments. Among them, younger ethnic groups (ages 20-29, 30-39, and 40-49) are more pressure-sensitive and employees who have family history and lack of sleep are prone to workplace fatigue. Based on the results of this study, we look forward to providing managers with a reference in planning workplace health promotion courses and seeking explanations for employees' stressors.

Contact: LU Huei-Lan

Jianan Psychiatric Center, MOHW
14404@mail.cnpcc.gov.tw

The effect of Mindfulness Intervention on the Stress and Anxiety in In-service Nursing Graduate Students

CHEN Hsiu Ling, CHEN Yu Huei

Introduction

The purpose of this study was to explore the effects of mindfulness intervention on the stress and anxiety in nursing graduate students.

Purpose/Methods

This study was done from a university of science and technology in Northern Taiwan using convenient sampling. The mindfulness meditation intervention lasted for 4 weeks. The research instruments included demographic data, a perceived stress scale (PSS) and State-Trait Anxiety Inventory State (STAI-S).

Results

A total of 17 cases were recruited. The result revealed the average score PSS was 25.47(SD=5.06), STAI-S was 49.35(SD=2.87) before the intervention. There was no significant difference on stress PSS($t = -.75$, $p = .46$) and anxiety STAI-S($t = -1.20$, $p = .25$) after the intervention. The two were moderately correlated. ($p = .041$, $r = .375$).

Conclusions

There is no significant difference on stress and anxiety after the intervention. It is speculated that mindfulness needs a long time to be practiced in life in order to have a significant impact on mental health. The sample size of this study is insufficient as well. It is recommended to adopt a two-group pre-test and post-test experimental design with a control group to enhance the credibility of the research results and the value of application in the future study.

Contact: CHEN HSIU LING

Chang Gung Memorial Hospital
f22206@gmail.com

The New Trend of Occupational Health in Taiwan – Experience in On-site Health Service

CHENG Min-Fen, LIN Wei-Chung, HUANG Min-Jen, YEN Chia-Chi

Introduction

With changes in the industrial structure and employment, the Ministry of Labor has established labor health service systems since 2009. The amended "Labor Health Protection Rules" stipulate that businesses shall engage professionally trained full-time or contract doctors and nurses to render on-site service according to their scales. The purpose is to relieve distress and promote health of labor.

Purpose/Methods

The public community hospital established an on-site service team, which consists of 2 specialists in occupational medicine, 4 qualified doctors, and 6 professional nurses, in 2019 to promote government policies. Such on-site service spans Category 1 (high risk) such as electronics manufacturing and chemical manufacturing, Category 2 (medium risk) such as food and beverage and pharmaceuticals, and Category 3 (low risk) such as leisure service and travel agency. The scope of service includes health examination evaluation, selection of suitable labor, follow-up health management, health management of labor with high risk, and prevention of work-related injuries and emergency treatment.

Results

Since 2019, the on-site service team has served 60 businesses (as of April 2021) (growing by 1100%), reported revenue of more than NT\$10 million (growing by 2300%), and received 100% satisfaction in "overall service," "nurses' attitude and professionalism," and "willingness to renew," 82% in "charges," and 90% in "doctors' attitude and professionalism" and "endorsement."

Conclusions

On-site service allows businesses to increase the awareness of labor health, reduce the incidence of occupational injuries, and extend the service life of workers. Providing such service in line with the government policy contributes to the hospital's revenue, enhances overall preventive medicine, and promotes healthy retirement.

Contact: HUANG hsin-jou

Kaohsiung Municipal Min-Sheng Hospital

hsinjou1224@gmail.com

The pilot study on musculoskeletal injuries of Nursing assistants in a northern regional hospital

WANG Yu-Hung, CHANG Yuanmay, HOU Yu-Hsueh, WU Pi-Kent, CHEN Hui-Fang, YAO Wen-Chen, LIN Ching-Feng, LUO Jiing-Chyuan, LI Ling-May

Introduction

The demand of nursing assistants (NA) is increasing sharply now. They perform care tasks, such as assisting patients feeding, percussion, bathing, and transfers bed to chair and back, etc. Long-term workload may cause chronic musculoskeletal injuries. To reduce the chronic musculoskeletal injuries of nursing assistants and extend their working life.

Purpose/Methods

From July to September 2019, we use the "Simplified Musculoskeletal Injury Questionnaire" to a total of 23 nursing assistants in a northern regional hospital. There are 12 NA in the nursing home, 11 NA in the respiratory department. Statistical methods include descriptive statistics and frequency distribution analysis.

Results

NA: male(4, 21%), female(19, 79%); average age: 49.78±7.128 years; average height: 1.59±0.056 m; average body weight: 68.96±13.68 kg; average BMI: 27.35±4.726; average working experience: 5.59±4.582 years, of which 0-1 year(1, 4%), 1-5 years (11, 48%), 5-10 years(8, 35%), >10 years(3, 13%); the most painful area is shoulder (15, 60%); neck, wrist and knee tied for second (12, 48%); third for arms (11, 44%); discomfort time for 1 month(5, 22%), 3-6 months(3, 13%), 1 year(3, 13%), more than 1 year(5, 22%), no discomfort(7, 30%); discomfort(16, 70%).

Conclusions

Most of nursing assistants are a high-risk group of muscle strain in the occupational injury. It is necessary to provide better health education for working postures, transfer rotation skills, and assistive devices for mobility; and even rehabilitation treatment to reduce muscle tension and increase muscle strength.

Contact: LIN Ching-feng

Keelung Hospital Ministry of Health and Welfare

chingfeng01@gmail.com

Create a happy workplace in hospitals

CHEN Yiling

Introduction

We value the physical and mental health of our employees. Working in a hospital is a high-stress environment. How to make employees happy to work and release stress and fatigue in a timely manner is our primary goal. To this end, we improve the physical condition, mental condition and family condition of employees.

Purpose/Methods

1. Every year, employees' health checks are held for free. The inspection time allows employees to choose freely, and employees do not need to ask for leave, which will not cause additional pressure on work. If there is any abnormality in the inspection data, employees will be actively arranged for follow-up visits and continue to track them so that employees can go to work at ease. 2. Every year, employees and family activities are arranged, such as watching movies together, outdoor sports together. All expenses are borne by the hospital. I hope that in addition to hard work, employees and their families can have a better emotional connection. 3. Group tours are organized for employees every year. The employees choose the dates and destinations, and the hospital subsidizes nearly 50% of the expenses. Of course, the hospital also bears the expenses of the family.

Results

Every year 100% of employees participate in employee health checks. Ensure that there is no problem with the health of the entire hospital staff. It spends about NT\$1 million every year, cite 2-3 movies, and employee travel, and the annual survey of employee satisfaction is as high as 85% or more. It can be seen that the employees are in favor of and satisfied with the hospital holding similar events

Conclusions

Employees are the most important asset of the hospital. During this period, COVID-19 is raging around the world, and it is really important to make tired hospital employees feel comfortable physically or mentally.

Contact: CHEN yilin

1016045@kmhk.org.tw

The Effectiveness of Aromatherapy on the Stress Adjustment and Relief of Medical Personnel

HU Yi-Fen, CHOU Chien-Chi, HUANG Wen-Ho

Introduction

In the practice environment, the physical and mental occupational hazards which medical personnel face lead to occupational stress and excessive occupational stress will easily cause negative health reactions. Aromatherapy promotes

physical and mental health that essential oil is used and absorbed through breath and skin through massage, inhalation...etc. This study evaluates the effectiveness of aromatherapy courses on the stress adjustment and relief of medical personnel.

Purpose/Methods

Purposive sampling was adopted to collect medical personnel from several hospitals in southern Taiwan who join 4 aromatherapy courses held from January to September 2020 as our study samples. In the aromatherapy courses, we use 1% lavender & sweet orange essential oil for inhalation and 7% lavender & sweet orange essential oil for massage. Demographic variables are collected and we use Chinese 14-item Perceived Stress Scale for stress relief evaluation.

Results

We have 72 effective samples in total that complete the courses with 98.6% female. 26 work in shifts and 46 are day shifts. We can see effective improvements ($P < .05$) on stress adjustment that those who pre-test "NORMAL" is 65.3% and it raises to 81.9% after intervention; those who pre-test "LITTLE STRESSFUL AND NEED RELIEF" is 34.7% and it drops to 18.1%. Those who work in shifts have better improvement ($P < .05$) than those who work day shifts.

Conclusions

The result shows that to implement aromatherapy through inhalation and massage is helpful with stress relief and we recommend that medical institutions provide aromatherapy courses for staff health promotion. We can see significant improvements for those medical personnel who work in shifts. However, the findings shouldn't be over inferred due to limited samples. We think the better solution for the further research is to expand the study scope to different groups and to see if there's any discrepancy.

Contact: HU Yi-Fen

n71760@gmail.com

Promoting Mental Health and Establishing Mental Support System for Employees at a Regional Hospital in Taiwan

SUN Hsu-Yuan, LIAO Hsiu-Mei, LIN Yi-Shiuan, HSU Hui-Mei

Introduction

Totally 1,003 hospital employees conducted "Taiwan Depression Scale" in 2017. The results showed 17% employees needed psychological counseling or even medical therapy. How to promote employee mental health is top priority.

Purpose/Methods

Several measures are conducted in 2017-2020 including: 1. "Team for Staff Care" to help take care of employees. 2. Set up the psychological counseling platform. 3. Annually arrange employee health checkup and offer psychological support to those who got diseases or cancers. 4. Encourage hospital staff to participate in social welfare activities, to help the poor and weak to acquire happiness from helping others. 5. Establish 24-hour Staff Lounge

for pressure relief. The lounge got Award of Excellent Design of Staff Space from USA Healthcare Design Magazine.

Results

1. Staff's satisfaction to mental support measures is from 81.3% in 2017, 82.7% in 2018, up to 85.6% in 2019 and 88.5% in 2020. 2. Employees attending mental health courses are increasing from 1,700 people-times in 2017 up to 5,950 people-times in 2020. Courses were also designed to train division chiefs to have cognition of staff mental problems. 3. Number of staff asking for help including psychological counseling is from 88 people in 2017, 99 in 2018, 111 in 2019 to 145 in 2020. The main issues for counseling are family care and job pressure. A nursery inside hospital was completed in 2020. Pressure-relieved activities were designed to link interesting game playing to encourage the staff to attend. 4. AI smart processes for outpatients and inpatients are developed to decrease staff working loading.

Conclusions

The hospital builds a safe and considerate working environment, and encourages staff to ask for help whatever difficulties they face. We also extend our love to the retired employees and community residents to further promote a healthy society.

Comments

Mentally and physically healthy staff can lead to satisfactory patients. The hospital utilizes various resources to create friendly-working environment and maintains staff's mental and physical health. The staff are happy at work, devoted their medical profession to the public in community, and achieve to a win-win situation.

Contact: CHIA WEN Lai

Show Chwan Memorial Hospital

chd7203270@hotmail.com

Enhancing Resilience of Hospital Nursing Staff

HUANG Liang-Chang, LIU Wei-Shu, WU Wan-Tzu, HUANG Yu-Ming, TSENG Meng-Chuan, HSIEH Pei-Chi, CHUANG Shu-Ting, CHIEN Sou-Hsin

Introduction

Nursing staff are often under great pressure. Exercise and mindfulness-based stress reduction (MBSR) can cultivate present moment awareness to train the nursing staff in concentration and self-awareness to improve the stress resistance. It enables the nursing staff to protect themselves and restore their emotions when encountering difficulties, so as to achieve good nursing quality and improve patient safety.

Purpose/Methods

Using the Quality Control Circle course selects the best countermeasures: (1) teaching mindfulness knowledge skills (2) designing mindfulness exercise tables to encourage daily practice (3) group sharing - creating atmosphere for seeking sports resources and creating access to exercise for cultivating exercise habits (4) Using the cloud platform to create group competitions to drive learning motivation.

Results

The overall positive response rate of resilience reached 145.5% (improvement rate 19.3%); the positive percentage rate of resilience reached 157.3% (improvement rate 392.1%). It can be seen that the resilience has improved significantly. The achievement rate of regular exercise habits was 115.1% (improvement rate: 23.7%) which shows that exercise habits have improved significantly. The achievement rate of doing what you like to nourish yourself was 71.8% (improvement rate 15.1%, which can be seen that the level of optimism has increased.

Conclusions

Through the systematic mindfulness learning and the cultivation of exercise habits to achieve the effect of improving resilience. Regular courses and continuous practice through daily life to experience self-acceptance and tolerance. It is recommended to gradually expand to the whole hospital. The way of conducting the activity is to use group competitions to effectively generate motivation. Using Modern technology wearable devices can effectively overcome the limitation of time and space through cloud sharing.

Contact: FANCHIANG Yu-Chen

Buddhist Tzu Chi Medical Foundation

df173536@tzuchi.com.tw

Decrease the number of incident injured by cleaning sharp instrument to operating room nurse

LEE Min-Yen, CHOU Hui-Ling, HSIEH Fu-Chiao, CHEN Sue-Hui

Introduction

Stabbed by a sharp object is a common occupational injury to nurses in the operating room. Strengthen the knowledge and skill of cleaning sharp instrument is able to prevent OR nurses injured by sharp instrument, this project is target to decline their risk of occupational injury, meanwhile promote their work safety, this is one of the major index to show the quality of operating room is improved.

Purpose/Methods

There were in total 3 staffs of our unit, which were injured by sharp instrument while cleaning during the period of July to September 2019, we analyzed the reason and found out it was due to incomplete procedure manual, workers not thoroughly knowing the standard operating procedure of cleaning surgical instrument, unformulated inspect, lack of instrument cleaning education and training, not owning both anti-pinching equipment and cleaning-enzyme measuring tools and shortage of surgical device.

Results

In order to achieve the purpose of reducing the number of injured by cleaning sharp instrument, we must strengthen their knowledge and skill of cleaning sharp instrument. This requires revising the procedure manual, purchasing safe instrument washing device, planning medical simulation, laying down proper examine protocol and our creative 7-steps formula, to let the staffs keep the steps in mind, and clean the surgical device more correctly. After execute the above-mentioned measures,

the rate of OR nurse clean the instrument correctly has inclined from 51% up to 93%, the number of sharp instrument cleaning injured incident maintain zero.

Conclusions

Strengthen the knowledge of workplace safety, is indeed helpful for safe working behavior, not only effectively reduce the chance of operating room nurse getting hurt by sharp instrument while cleaning, but also create a fine working environment. This shows operating room nurses' career safety was valued, meanwhile operating room's nursing quality was elevated.

Contact: LEE MIN YEN

Kaohsiung Municipal Siaogang Hospital

emandy2018@gmail.com

Comparison of the Body Fat Percentage and Skeletal Muscle among Different Weight Hospital Staff in Pilates Training

CHEN Shu-Yen, WANG Chen-Wei, HSU Hung-Yi

Introduction

The hospital staff often work shifts, so it is difficult for them to develop the habit of regular exercise. According to the physical examination analysis of the staff of Tungs' Taichung MetroHarbor Hospital in 2019, it was found that there was 24.3% of the staff had a body mass index (BMI) value higher than 27. Therefore, the hospital employs professional fitness instructor to pilates training to help staff to reduce body fat and build muscle.

Purpose/Methods

The eight-week pilates training program was conducted at the hospital, with 14 trainees classified into groups of normal weight and abnormal weight ($BMI \geq 27$). The training frequency is 4 times a week, and each training session is 60 minutes. Paired sample t test was used as the data analysis method to compare the difference in training effectiveness between groups with normal and abnormal body weight.

Results

(1) The "BMI" ($p < 0.01$), "whole-body fat percentage" ($p < 0.01$), "trunk fat percentage" ($p < 0.01$), "fat percentage of two wrists" ($p < 0.05$), "fat percentage of two feet" ($p < 0.01$) and "body fat percentage" ($p < 0.01$) were statistically significant difference, among trainees with different body weight, and all the values in the post-test lower than the pre-test; (2) The "whole-body skeletal muscle" ($p < 0.05$), "trunk skeletal muscle" ($p < 0.01$) and "skeletal muscle of two feet" ($p < 0.01$) were statistically significant difference, among trainees with different body weight, and all the values in the post-test higher than the pre-test.

Conclusions

The hospital has demonstrated that the pilates training program is effective in improving the BMI, body fat percentage and skeletal muscle in employees and that employees with normal weight are more likely to reduce body fat and increase skeletal muscle, thereby achieving body shaping. Therefore, it is suggested that the hospital should continue to offer workout

programs to help employees maintain personal health condition, and build a friendly workplace that supports health promotion.

Contact: WANG CHEN WEI
cwt12907@gmail.com

Association between body fat and muscle strength in medical employees by body composition techniques.

CHEN Yu-Chun, CHEN Jiyuen-Tieng, TSENG Chi, CHUO Ying-Hsiang, HUANG Hui-Ting

Introduction

From the point of view, the healthy aging people should concern with their body movement as early as possible. Several studies have revealed that the body fat increased, but the muscle mass and strength decreased. Therefore the most important concept is to educate all employees having accurate health knowledge. Based upon this research, we are hoping to obtain all employees health indicators, such as, their body composition, including body fat and muscle strength.

Purpose/Methods

There were about nine hundred employees from Taiwan Adventist Hospital enrolled in 2019. According to the nature of the medical property, we divided into four groups, Medical Affairs, Medical Technology, Nursing Services, and Administration, it includes their BMI, body fat percentage, and muscle strength from fitness check-up. The evaluation of body fat percentage is from the Body Composition Analyzer (TANITA BC-418). However, the muscle strength was referred from Taiwan National Fitness Normal Model. Statistics software was by SPSS 23.

Results

In compare of average body fat percentage from four groups, all employees was about $30.8 \pm 7.7\%$, Nursing Services was about $32.6 \pm 7.6\%$, Medical Affairs $28.5 \pm 7.8\%$, $p < 0.001$. Obviously, the percentage of Nursing Services was higher than the Medical Affairs. After controlling BMI, the risk of poor grip performance increased by 3% for each increase of 1% body fat percentage (95% CI: 1.00-1.06).

Conclusions

In accordance to the study that if the body fat rate increased, it will be impacted the appearance of muscle strength for about 83.7%. Also, it was found out that all employees' grip strength was under the standard level for about 31.1%. In the meanwhile, we are facing the problem of potential risk employees who are considered with hidden obesity within four medical units. Therefore, we should emphasize to offer more health education for those who are potentially obese.

Contact: CHEN Yu-Chun
 Taiwan Adventist Hospital
winnie161090@gmail.com

The physical fitness test and analysis of the staff in a medical center

HSU Chieh-Kuan, WEI Fang-Chun

Introduction

The health of hospital worker would be influenced by shift work, patient contact, and so on. The health state of staff is worth to care to maintain good service quality. This study aimed to realize the physiology state and health related factor of hospital workers by physical fitness test.

Purpose/Methods

Collected the demographic, physiology measurement, and physical fitness data. Included work department (clinical or administrative work), gender, age, waist size (determine obesity or not), handgrip, flexibility (seated forward flexion test) and cardiorespiratory endurance (3-minute step test). We referred to the fitness testing norms from ministry of labor to adjust the result by gender and age. It divided into three groups, namely poor, medium, and good. The Pearson's chi-square test was used to detect the difference between demographic and other data.

Results

There were 91 staff involved in the study, 52.7% were administrative worker. After adjustment, non-obese from waist size were 74.7%, poor cardiorespiratory endurance were 40.7%, good flexibility were 45.1%. The chi-square test display there were no significant relation between work department and various indicators. In obesity group, the proportion of male (50.0%) was higher than female (19.2%) ($\chi^2=7.26$, $p=.007$). In 45~54 years old group, the proportion of good cardiorespiratory endurance (6.3%) were lower than medium (36.4%) ($\chi^2=17.42$, $p=.02$).

Conclusions

Different work department would not influence the physical state above. In overall, the flexibility of hospital worker were good, and the proportion of obesity were low, but male should still pay attention to the overweight problem compared to female. The handgrip and cardiorespiratory endurance of all staff were poor. Especially the cardiorespiratory endurance tends to get worse with the age. It is recommended that staff increase aerobic exercise and muscle strength training.

Contact:
cgh418180@cgh.org.tw

The Efficacy of Workplace Health Promotion by Exercise Intervention

WONG Ruey-Hong, XU Hongyi

Introduction

1. Background: The World Health Organization indicates that 'lack of bodily activity' has become an international public health issue and also the fourth contributing factor of death rate globally (Ford, 2005). In light of this, the main objective of the research is the research analysis in exploring workplace exercise intervention in which subjects were mainly workplace tested cases in 2016 that have been tested before and after the physical

fitness test while receiving a 3 months 36 hours of exercise intervention course program.

Purpose/Methods

2. Method: The data collected in the research uses the Chinese version of the computer statistical analysis software SPSS17.0 for analysis. All data are expressed as average value \pm standard deviation (mean \pm SD), and percentage. The result with $P < 0.05$ represents that there is a statistically significant difference. The methods of analysis include: descriptive statistics, Chi-square test, sample t test analysis comparing the average values between two groups. Instruments are sphygmomanometer, running step counter. Execution begins after the subjects of accepted cases have provided signatures.

Results

3. Result A total of 37 people were tested with an average age of 36.2 in which there were 33 (89%) women and 4 (11%) men. The results of before and after exercise intervention indicate: 22 (81%) people exhibited stable and improved blood pressure; 15 (56%) people exhibited improvement in myotome and muscular endurance; 9 (33%) people showed improvement in flexibility; 8 (30%) people showed improvement in cardiac pulmonary endurance. The result indicates: the physical stamina of workplace employees has all shown conspicuous improvement through exercise intervention.

Conclusions

4. Discussion: Workplace exercise intervention is traditionally carried out in the forms of medical personnel speech, health education which have not shown effectiveness. In consideration of this, the research team with many years of workplace health promotion experience has developed physical fitness test and exercise intervention method. The team members are all national institution certified qualified testers and experienced medical health education teachers. Using standard tests and health education method has provided another option for the workplace health promotion in public health promotion.

Comments

Exercise is very helpful for the promotion of human health

Contact: MIN-FONG Tseng

Tungs' Taichung Metro Harbor Hospital
doctor66b@yahoo.com.tw

Occupational stress and related factors in a food manufacturing factory

YEN Yu-Ting

Introduction

The purpose of this study is to explore occupational stress and related factors in a food manufacturing factory.

Purpose/Methods

This is a cross-sectional study design. Subjects were the Taiwanese workers who had been employed for more than 3 months in a food manufacturing factory located in Tainan city. An anonymous self-administered questionnaire was used to collect data. SPSS 17.0 was applied to analyze data in this study.

Results

A total of 230 workers were invited to participate in our study, and 202 workers agreed to join the study. In total, 188 subjects completed the questionnaire (completed rate was 93.1%). Most of the subjects were female (56.7%), aged 31~40 (44.7%), with a university degree (61.2%). 54.3% workers married, and 77.1% workers whose salary was 20001 to 40000 NTS per month. 61.2% workers were technicians, 92% work on a fixed shift, and 47.4% had more than 10 years work experience. 50.5% subjects worked overtime as an ordinary / occasional in current half year. The scores of job control, mental workload, workplace justice, social and colleagues support were 52.0, 57.9, 54.6, 58.7, and 64.9, respectively. 61.7% subjects thought their work was high physical demand. 18.1% workers perceived high strain jobs. The characteristics and working status of subjects related to different domains in occupational stress. Long working hours was a significant factor on six domains, except the physical demand.

Conclusions

The mental workload and physical demand exist commonly in the food manufacturing factory. The health promotion programs should be modified with different characteristics of workers to create a friendly occupational environment in future.

Contact: YU-TING YEN

Jianan Psychiatric Center
cute-baby1987@yahoo.com.tw

Transforming into a healthy setting: The development of a training program for implementing sustainable occupational health programs

HABERECHT Olaf, DERENTHAL Marit

Introduction

Hospitals and health services struggle with increasing ages of employees and patients, shortages of skilled workers, job-related injuries, employee fluctuation, and generational conflict. Employers can develop and implement sustainable occupational health management strategies to counteract these challenges to promote long-term employment and better health outcomes. The German HPH Network, along with OptiMedis AG and vdek e.V., have developed and implemented an occupational health management training program for personnel responsible for occupational health in hospitals and both in- and outpatient care facilities. After completing the training, directors, middle management, works councils, and personnel management are empowered to be active and competent implementers of sustainable corporate health programs.

Purpose/Methods

The program is a 6-part, consecutive seminar series on the design and implementation of sustainable occupational health initiatives. Based on Bloom's Taxonomy of learning, the program utilizes a blended-learning approach with an online exchange platform and Quality Improvement Collaboratives. Courses on healthy leadership and lifestyle and designing sustainable programs commence with a practical demonstration of concepts, where participants implement their own projects.

Results

Initial internal and external program evaluations show that the curriculum supports participants in overcoming typical challenges in implementing sustainable programs such as lack of resources, knowledge, and long approval processes.

Conclusions

Health care facilities play both an important role in population health and are a place of health for employees. After our training, participants can immediately become active in transforming their institutions into health promoting settings. The curriculum is sustainable, improves health competence of employees and executives throughout the entire structure of the organization, and increases the attractiveness as an employer.

Contact: HABERECHT Olaf

Deutsches Netz Gesundheitsfördernder Krankenhäuser und Gesundheitseinrichtungen
info@dngfk.de

The Effects of vocational rehabilitation for occupational accidents labor

LIU I-Hsiu, HUANG Wan-Yun, CHU Chan-Man, YANG Chia-Lin, TUAN Sheng-Hui, SUN Shu-Fen, LI Min-Hui, CHEN Jin-Shuen

Introduction

According to the Ministry of Labor statistics in 2016, there were 52198 cases with work-related injuries and illness in Taiwan. We established a vocational rehabilitation center in our hospital to help occupational accidents labor. The purpose of the program was to provide individuals with occupational injuries instant information and to assist workers to return to their workplace.

Purpose/Methods

The center mainly recruited patients suspected with workplace-related injury via other medical departments referral. After referral, we ensured the diagnosis and established personal archives. For those whose recovery time was over one month, we provided health education, information of social services and referral to the Kaohsiung City Government Labor Affairs Bureau. When workers' condition improved, we provided interventions included evaluation and facilitation of ability to work, social adjustment counseling, and occupational accommodation. This study summarized the characteristics of labor we provided interventions as aforementioned from September 2016 to August 2017.

Results

Sixty workers completed screening from September 2016 to August 2017 and was introduced to our services. Forty employees received evaluation and facilitation of ability to work. During our follow up at one, three and six months after intervention, 33 returned to their job.(Figure 1) Seven cases remained unemployed for reasons as listed in table 1. For social adjustment counseling, fourteen cases were referred to counseling after screening. However, four of whom refused our intervention. The ten cases who underwent counseling were satisfied with the service (table 2). During our interview, six cases

said they had more ideas in coping problems. All ten cases were satisfied with the counseling services.

Conclusions

With the support of Occupational safety and health administration, ministry of labor, Taiwan, we established a more integrated and more comprehensive service delivery system for patients with occupational injury.

Contact: LIU I-Hsiu

Department of Physical Medicine and Rehabilitation, Kaohsiung Veterans General H
bruce_pelagia@msn.com

Diversified health promotion activities for the promotion of physical fitness results

CHEN Mei-Yu, YANG Shan-Shan, CHEN Ya-Ling, HUANG Yu-Chow, HUANG Pei-Ju

Introduction

The pre-test of physical fitness of our staff in 2020 showed that 42.1% of the cardiorespiratory ability was average or above, 48% of muscle endurance, and 55.6% of flexibility. Therefore, we planned multiple exercise methods, and then performed physical fitness post-tests, and analyzed the results by statistical analysis. This encourages employees to practice a healthy life.

Purpose/Methods

1. Physical fitness will be tested in June and post-test in September. 2. From June to September in 2020, plan diverse activities: sports nutrition and the prevention of sports injuries lectures each one; healthy eating cum lab sessions were four; Healthy Get Fit exercise classes count 12; organizing competitions with ten thousand steps walking, stair climbing sports, happy farm use, the unit of voluntary movement, sports equipment, FB posting, weight management.

Results

1. Body composition: body weight decreased by 148 people, a decrease of 57.1%; body fat decreased by 124 people; a decrease of 47.9%. 2. Cardiopulmonary ability and above accounted for 50.2 (8.1% improvement), muscle endurance accounted for 49.5% (improvement 1.5%), flexibility accounted for 58.6 (3%)

Conclusions

According to the results of our hospital's physical fitness test, it is shown that diversified health promotion activities are effective in improving physical fitness.

Contact: CHEN MeiYU

Ten-Chen General Hospital(Yang-Mei)
nr68815@tcmg.com.tw

Using dietary and exercise education intervention to promote weight loss during Covid-19 pandemic

TIAN Hui-Yi, CHEN Hsiu-Ling, SHIH Whei-Mei

Introduction

Obesity is one of the health issues that attract global attention. Among the top ten causes of death in Taiwan 2019, cancer, heart disease, cerebrovascular disease, diabetes, high blood pressure, renal syndrome, and chronic hepatitis are all related to obesity. The WHO and research teams have discovered that obesity is a risk factor for COVID-19 and has a "very obvious" correlation. The aim of this study was to improve awareness of dietary calorie needs and weight loss for employees in a traditional plastic factory through dietary and exercise education program.

Purpose/Methods

This is a pre-experimental design with one group study. Dietary and exercise education program using the Ottawa Charter Five Plan of Action Plan as intervention. IN-Body body composition analyzer and lifestyle questionnaire were used for data analysis.

Results

The results showed there was significant difference in lifestyle change such as "knowledge of calorie needs" ($p < 0.001$) and "diet calories control" ($p = 0.016$) after intervention. There was no significant change in "regular exercise" ($p = 0.25$).

Conclusions

The important key to success in this program is the higher managers' willingness in providing incentives to support all events held to improve employee's participation rate. Based on the comprehensive evaluation of the behavior change stage of the healthy behavior theory, some employees are still in the preparation period. In terms of exercise, most employees chose to take active walking. The exercise intensity is insufficient. If it can be maintained and controlled continuously, there should be a significant difference.

Contact: TIEN Hui-Yi

MacKay Memorial Hospital / Graduate Institute of Gerontology and Health Care Man
m08002@mail.cgsu.edu.tw

Effectiveness of Nutrition and Physical Activity Interventions for Weight-Control Program at Workplace

LIEN Tsung-Jung, LEE Ai-Ting, LEE Kang-Wei, OUYANG Chung-Mei

Introduction

Previous studies indicated that promoting health-behavior change including balance diet and active lifestyle were effective on weight control. The purpose of this study was to explore the

effects of weight-control program at a workplace for overweight and obese employees.

Purpose/Methods

Participants were employees of a technology corporation in the area of Hsinchu city (Taiwan) who joined the program and received 6-week weight-management program including one-hour nutrition classes (lectures) and one-hour exercise each week. Participants were asked to keep a food diary in which they recorded what and how much they had eaten, and when and where the food was consumed. Participants' anthropometric measurements were performed and knowledge, frequencies of healthy diet, exercise behaviors were assessed by questionnaires at the beginning and the end of program. The body weight were collected again at 4 months later. All data was analyzed by using SPSS 22.0 version software.

Results

All participants were able to identify their initial motivation for joining the weight management program. The most common motivator was to improve their health in general. All participants ($n=20$) had a BMI of 27.6 ± 3.7 kg/m² in the beginning, 26.8 ± 3.6 kg/m² at the end of the program ($p < 0.001$), and 26.1 ± 3.5 kg/m² at the 4 months follow up. The average weight loss for all participants was 2.0 ± 1.9 kg of initial weight in 6 weeks ($p < 0.001$) and 4.3 ± 3.2 kg at 4 months follow up ($p < 0.001$). The average percent of body fat loss was 2.5% and the average of waist circumference reduction was 2.4 cm. Weight-related nutrition knowledge was increased 8 %, dietary and exercise adherence were increased 49.5% and 18.5 % respectively.

Conclusions

According to our results, a regional institute-based weight management program emphasized on lifestyle and self-monitoring of food intake interventions through small group education and peer support can result in short-term weight losses and contribute to the healthier behavior and nutrition knowledge improvement at workplace.

Contact: LIEN Tsung Jung

Dept. of Dietetics, National Taiwan University Hospital Hsin-Chu Branch
sinna1116@hotmail.com

Analysis of the main causes of dengue fever vector mosquito control and improvement countermeasures

LIN Tseng Yu, TSENG Shih Cheng, HUANG Chi Wen

Introduction

Taiwan locates in the subtropical area and is in a high risk area of dengue fever. The subject of this study was a hospital in Taiwan. The health authority inspected this hospital on January 28, 2016 and found that there were larvae in the underground drainage of the parking lot. Therefore the hospital was listed as one of dengue fever prevention and control targeted venues. Furthermore the dengue virus is not transmitted directly from person to person, but through vectors. When the mosquitoes bite the human infected with dengue fever virus; after that the

virus will multiply in the body cavity and saliva line of the mosquito. Dengue is mainly transmitted to other people by the bite of mosquito that is infected with the dengue virus.

Purpose/Methods

The fishbone diagrams and problem countermeasure analysis were used for this research project. We formulated the improvement strategies based on the problems established by the analysis results and implemented the improvement project according to the PDCA procedures.

Results

We continued to execute several mosquito prevention and control countermeasures of this improvement project. The results of the four on-site audits conducted by the health authority in December 2019, July 2020, August 2020 and December 2020 were all qualified, and the hospital was lifted from dengue fever control targeted venues.

Conclusions

Establish the analysis of the main causes of dengue fever and formulate improvement strategies. We strengthened regular professional education and training for vector/mosquito control personnel, and conducted the multi aspect environmental inspections, regular disinfection and dosing operations, and improvement of environmental sanitation hardware facilities. Also the vector mosquito breeding source was cleared in advance, which was the root of dengue fever prevention.

Contact: LIN TSENG YU

d810021@gmail.com

Creating a Healthy Workplace Environment by Reducing Sedentary Behaviors Among White-collar Employees: Applying the 'Exercise Challenge' on social media

LEE Jiyoung, KIM Soo Kyoung, KIM Jiye, KIM Hyekyeong

Introduction

While Sedentary behavior (SB) is becoming a serious health concern, Korean office workers are heavily exposed to the negative effects of SB because they are inevitably sitting at their desks for a long time. As exercise challenges (EC) on social media be on-trend at the Covid-19 situation, a variety of physical activities have become a daily routine for many people. The objective of this study was to get an in-depth understanding of SB among Korean white-collar employees and to seek possible SB intervention strategies within the workplace based on EC on social media.

Purpose/Methods

We conducted Focus group interview (FGI) and in-depth interview (IDI) using semi-structured questionnaires. A total of 21 white-collar employees were selected as participants for FGIs. They were divided into three groups: G1: staff & junior managers, G2: managers, and G3: directors. A total of 5 white-collar employees who have experienced EC on social media were selected as participants for IDI to reflect the findings of the FGIs.

All interviews were audio-recorded with prior consent and analyzed through the thematic coding.

Results

The FGIs results have shown that the major factor affecting the intention to reduce SB is individuals' level of interest in health. In addition, norms and facilities encouraging physical activity at workplaces, the number of health-promoting programs were affecting the health behaviors of office workers. Based on this, the main finding of IDI was that EC makes people have self-development needs. The rewards were the determinant of choosing an EC. On SNS, motivation and support can be gained from others and EC made them think that health behaviors are easy to practice. This led to improve individuals' level of interest in health.

Conclusions

Behaviors to reduce SB among white collar employees appeared to be influenced by both individual-level and workplace-level factors. An increase in the individuals' level of interest in health was found from the people who have experienced EC. The EC on social media is expected to contribute to creating a healthy workplace, as an effective intervention to reduce the negative effects of SB among white-collar employees.

Contact: LEE Jiyoung

Graduate School of Ewha Womans University

liy326@naver.com

A Healthy Lifestyle among Employees through Healthy Weight-loss and Climbing Competitions

CHOU Yi-Jiun, TSAI Ru-Ying, HSU Hung-Yi

Introduction

Tungs' Taichung MetroHarbor Hospital offers fitness classes, point collection competitions for healthy boxed lunches. According to the medical checkup results of employees, the abnormal BMI ($BMI \geq 24$) was 45.8% in 2019, down 2.2% from 48% in 2018. It is expected that the figure would continue to decrease in 2020. To help employees build a healthy lifestyle, the hospital hold Health Promoting Festival activities in 2019, including two sub-races of healthy weight reduction and stair climbing.

Purpose/Methods

The hospital staff were motivated to participate in weight reduction activities, with the aim of losing 1kg each, so that employees can pay attention to their own weight. The climbing competition involved the employees and their family members for a relay race. The three stages were the "stairs climbing contest," the "hula hoop," and the "rope skipping." The contest use questionnaires method to find out the staffs' attitudes and thoughts towards activities, as well as the feedback of the activities.

Results

The healthy weight loss competition was held among 1,157 hospital staff. The average loss of each person was 1Kg. The number of participants in the climbing competition was 68, with the job categories including medical treatment, nursing, medical technology and administration. The team taking first place took

3 mins and 11 secs. The results of the questionnaire showed that 97% of employees thought that the activities conducted by the hospital were worthwhile, and 90.2% were positive about the events.

Conclusions

For those entering the climbing race, 82.1% of them held that participating in health promotion activities could save medical expenses, raise their awareness of health and achieve a healthy lifestyle. According to the results of the questionnaire, employees all expressed strong interest in continuing to take part in the Health Promoting Festival series activities and added that the process was very interesting and could build team spirit.

Contact: TSAI Ru Ying

Tungs' Taichung MetroHarbor Hospital

t1194411944@gmail.com

The relationship between physical activity and fatigue in military personnel.

HSU Pei-Jung, LIN Jing-Yi, FANG Wen-Hui, CHENG Wan-Yi, CHIANG Hui-Shan

Introduction

Noncommunicable diseases are by far the leading cause of death in the world. Noncommunicable diseases kill more than 36 million people each year. Noncommunicable diseases are preventable through effective interventions that tackle shared risk factors, namely: tobacco use, unhealthy diet, physical inactivity and harmful use of alcohol. In addition, about 20% of adults reported persistent fatigue. Physical exercise is a healthy behavior and is expected to eliminate fatigue. The purpose of this study was to examine the physical activity and fatigue to investigate for the health promotion plan of soldiers.

Purpose/Methods

The study began in Jun. 2019 and ended in Aug. 2019. This is a cross-sectional study using self-administered International Physical Activity Questionnaire (IPAQ) and Fatigue Severity Scale. All the statistical values in this study were determined with $p < 0.05$ as the critical level. The data were analyzed by SPSS18.0 for descriptive and statistical analysis.

Results

We included 108 participants from a military in Taipei. The average age of study participants was 38.8 years old. There were 68 (63%) men and 40 (37%) female. The results showed that 26.9% of soldiers were low physical activity, 47.2% of soldiers were moderate physical activity and 22.2% of soldiers were high physical activity. There are 35% moderate to high work fatigue and 19% moderate to high personal fatigue. Logistical regression analysis showed that: (1) The work fatigue which influence differences level ($OR=0.528, 0.271-1.029$) of physical activity. (2) The personal fatigue which influence differences level ($OR=0.377, 0.143-0.997$) of physical activity. (3) There was no significant difference levels of physical activity on the personal factors.

Conclusions

The results show that there is a consistent dose-response relationship between physical activity and fatigue, and whether the time factor is appropriate. Therefore, we suggest to consider the different types of health promotion programs related to physical relaxation, such as muscle strength training or softness exercise.

Contact: HSU PEI-JUNG

Department of Family Medicine & Community Health, Tri-Service General Hospital,

paggv.hsu@gmail.com

Multilevel factors associated with office workers' sedentary behaviors in Korea : a multiple regression analysis studies

JO Hwa Yeon, KIM Jiye, KIM Soo Kyoung, KIM Hyekyeong

Introduction

Physical inactivity is one of the global leading risk factors for all-cause mortality. In particular, sedentary behavior is the main cause of various chronic diseases related to obesity. For office workers, sitting at work is a health problem because they sit and spend most of the time. Therefore, a multiple regression analysis was conducted on adult office workers to understand the individual factors and environmental factors that affect the sedentary times during work and the degree of the practice of behaviors for reducing sedentary behavior.

Purpose/Methods

22 companies were surveyed for an environmental survey of the workplace, and a questionnaire survey was conducted on 574 workers, but the number was 521, excluding missing values. The individual level factors were investigated with the Integrated Behavioral Model. Environmental factors were diagnosed by using the Worksites Health Promotion Environmental Assessment Tool developed by DeJoy et al. (2008) for each workplace.

Results

'Long sedentary time during work' was associated with musculoskeletal disorders at the individual level ($p < 0.01$) and positive attitude toward behavior to reduce sedentary behavior while working ($p < 0.05$), but it was associated with lower behavioral intentions ($p < 0.01$). Among the workplace level, the most influential factors were the number of workers at the workplace, the establishment of workplace health promotion policies, the distance from subway and bus stops close to the office, and the number of desks for active work. 'High level of action for reducing sedentary behavior' was associated with the absence of individual-level musculoskeletal disorders and high behavioral intentions ($p < 0.01$). Among the workplace level, the most influential factors were the distance from the nearest subway station and bus stop to the office, and the implementation of the workplace health promotion program, and the establishment of the system.

Conclusions

To reduce the sedentary time of office workers and increase the actual level of behavior for reducing sedentary behavior, not only education for individuals for health behavior improvement but also improvement of a behavior support environment for reducing sedentary time in the workplace; It is necessary to prepare a system and policy related to the reduction of sedentary time.

Contact: JO HwaYeon
EWA WOMANS UNIVERSITY
hyjo@ewhain.net

Poster Session 22: Sharing information, research and capacity

Mobile-style music banquet promotes a warm medical environment - taking kidney dialysis patients as an example

LIU Hui Yueh, PENG Jung En

Introduction

Renal failure patients need to coexist with dialysis machines for a long time. They face dialysis 2 to 3 times a week and each time lasts for about 3-4 hours. To relieve the upset mood of patients, dialysis center promotes a warm medical environment through religious music, nostalgic music, or traditional folk songs for them during dialysis.

Purpose/Methods

The purpose of the music banquet is to encourage dialysis patients during the treatment process. Pastoral care dept. recruits professional musicians to give basic training courses such as empathy course and infection control. After course training, the caregiver and musicians together go to the dialysis center to have a music feast. There are four areas in the dialysis center of Mackay Hospital. Each area takes 10 to 15 minutes to perform music, and the music team arranges various musical instruments for satisfying patients' different needs.

Results

From the phenomenological presentation, the patient's feedback after playing the music is well received. Sometimes, patient will order their favorite song and tells the caregivers that they are sorry they can't help us a big applaud. However, their smile and concentration can be obvious observed during the music performance. Patients affirm it's helpful to alleviate their dull mood and make them feel they are cared.

Conclusions

The mobile-style music banquet project is successful. Music banquet brings a lot of warmth to patients during the long dialysis process, allowing them relax physically, mentally and spiritually. This program achieves the goal of the whole-person care -physics, mental, spirituality of Mackay Memorial Hospital.

Contact: PENG Jung-En
Mackay Memorial Hospital
alanpeng.mmh@gmail.com

A case-control study on treatment efficacy between intraoperative radiation therapy (IORT) and external beam radiation therapy (EBRT) among early breast cancer patient in Taiwan

LIU Ling Ling

Introduction

IORT is known as an innovative radiation therapy for early breast cancer, and the efficacy of IORT has been proven by a large number of clinical studies worldwide. IORT provides concentrated and precise radiation dose at the surgical site in a single treatment cycle during surgery. EBRT usually takes 30 days to complete a complete treatment cycle. In recent years, IORT has been approved for breast cancer treatment in Taiwan, but few researchers have proposed relevant clinical results. This study aims to explore the efficacy of IORT in the treatment of early breast cancer.

Purpose/Methods

The early stage female breast cancer with breast conserving surgery between January 2013 and December 2017 were included, and then divided into two group according to their radiation therapy method. A total of 219 IORT cases and 362 EBRT controls were analyzed to evaluate the treatment efficacy and cost-effectiveness among both groups.

Results

The EBRT group had significant higher progression rate compared to IORT group (6.91% vs. 1.37%, $P = 0.002$). Although Cox proportional hazard regression analysis indicated EBRT group obtained low progression risk in both univariate (Hazard ratio [HR] = 0.55, 95% Confidence interval [CI] = 0.09 – 3.47, $P = 0.525$) and multivariate analysis (HR = 0.34, 95% CI = 0.08 - 1.51, $P = 0.157$) with a follow-up interval of five years, no statistically significant was found. The log-rank test was applied to examine the 5-year overall survival between both groups, IORT and EBRT still show no significant discrepancy in overall survival ($P = 0.773$).

Conclusions

IORT require less radiation treatment duration compared and also avoid the damaged of surrounding tissues and organs, provide a better life quality for early stage breast cancer patients. The study results revealed that IORT could considered as another promising radiation therapy option for early stage breast cancer with breast conserving surgery.

Contact: LIU LING LING
Kaohsiung Municipal Hsiao-Kang Hospital, Kaohsiung Medical University
ling1259@gmail.com

Applying new media marketing to establish the Hospital Brand Image-by Regional Teaching Hospital in Taiwan

YAN Jyun Huei, YEH Hsin Han

Introduction

In the past, hospitals only provided medical services. In recent years, it's also very important for the hospitals to gain the trust of the public by "building brand equity" and "differentiation." In the past, medical marketing was aimed at gaining exposure in newspapers and TV, but it was not possible to track the effectiveness and find the target audience precisely. Nowadays, the widespread use of the Internet has welcomed the era of "new media", which is more interactive, connected and immediate than traditional marketing.

Purpose/Methods

The characteristic of new media is the diffusion power, creating a complete medical marketing model by integrating actual products and non-physical services, hospital activities, digital media, and responsive websites. For example, exposing medical activities repeatedly, and using data analysis to find out the content preferred by the audience, and understanding the effectiveness and satisfaction of people with the questionnaire.

Results

1. The average growth rate of outpatient services for new doctors at press conference is 5.61%. 2. Facebook: Creating a new account for one year, there are about 6,000 people following, and the average number of people reached by the epidemic messages has doubled. 3. Youtube: The shows are categorized into channels for doctors' introduction, health education, annual events. 4. Responsive Health Education Website: Enhancement of hospital's exposure resulting from public inquiries. 5. A survey conducted indicated that the overall image satisfaction rate of the hospital has increased from 74% to 85% now

Conclusions

With the change of medical model and the advantage of new media development, it has shown to be effective to integrate internal resources and create digital media to grasp the public's demand for medical treatment and realize the core value of the hospital brand.

Comments

The application of new media technology in health promotion aims to guide the awareness of health for the people, so that they can become healthier and the hospital can build its brand image, thereby creating a competitive advantage for the hospital.

Contact: HSIN HAN Yeh

Kaohsiung Municipal Hsiao-Kang Hospital

yaya114161@gmail.com

Developing educational material for hospitalized patients and updating clinical manuals for nurses of otolaryngology & neurosurgery ward at Boramae Medical Center

LEE Seunga, CHOI Sunmi, CHOI Gippeum, CHOO Hye-Bin, JEONG Yejin, AHN Alan, WON Jebin, JO Gahyeon, KIM Hyungji

Introduction

Although Patients were provided with education material for understanding care for pre and post operation, it has so many contents of the information and only text, which makes patients less concentrated. It's particularly difficult to the elderly and the very young. There was the nursing manual for each department of care, but it's not highly utilized. So this time material is intended to help nurses in their practical work and increase its utilization by adding and modifying the latest information.

Purpose/Methods

Based on existing educational material and manual, improvement points were found, revised, changed through literature review and consultation with each department. For visual aids, took pictures and attached. A questionnaire was proceeded before and after the use of new leaflet education material on information provision, understanding (readability), usability, and reduced anxiety on patients. A questionnaire was proceeded before and after updating the manual on information provision, expertise, understanding, and clinical application. Each category was converted into a score out of 100.

Results

With the previous educational material, the total score of satisfaction evaluation was 75 for patients and 71 for nurses. Using the new material, each category had a target of more than 80. And reached a target score with 88. It had a total score of 70 before updating the manual. After updating, the goal was over than 80. And after the update it reached 85. New educational material (leaflets) and new updated manual have satisfactory results for both patients and nurses.

Conclusions

This activities were undertaken to help hospitalized patients understand operation and improve clinical work for nurses. It was an opportunity to discover and organize things that were overlooked in the process of finding and scheming problems. Although we were aware of the problem of educational material and the manual, it was difficult to access them on a personal. By organizing a team, sharing opinions on finding problems and distributing tasks, we were able to improve the completeness of the activities.

Contact: LEE seunga

SMG-SNU BORAMAE MEDICAL CENTER

redearth716@naver.com

Improve the Troubleshooting Timeliness of Hardware Equipment in the Computer Facilities - Take LINE for Example

CHANG Hao-Chih, CHENG Chien-Hung

Introduction

Medical works are mostly digitalized, and thus maintaining the normal function of the computer facilities is the top priority for information technology technicians. The existing hardwares can only give out warnings via emails, phone calls and text messages, lacking the warning system that works efficiently enough for hospital staffs to be informed in time should anything go wrong. We can minimize the damage caused by the hardware malfunction or even prevent it from happening in the first place if IT technicians are informed and take actions early on.

Purpose/Methods

Sending out warning via LINE notifications can be a relatively more efficient way. By leveraging the communication software to establish a notification system for timely warnings, we can have the IT technicians well and sooner informed. From management and software development viewpoints, we categorize the potential causes for computer facilities malfunction into four main aspects: temperature, electricity, host computer, and human errors. We further analyze the above-mentioned causes using FEMA, and confirm that "host computer" is the main threat. An ounce of prevention is worth a pound of cure; our IT technicians plan to improve the existing warning system by developing the LINE notification system.

Results

LINE notification warning system has been tested through experiments, in which the storage capacity of host computer monitoring hard drives is manually overloaded, and the result turns out that it is indeed capable of informing IT technicians by sending messages to the targeted LINE group when there's hardware malfunction. With the data recorded by the system accessible online, our website provides basic searching manuals for data including time records for both the malfunction and troubleshooting, and the title of malfunction. In addition, it can generate the line charts for the recorded figures and the threshold figures in given time spans, which can later be utilized in future plans and improvements.

Conclusions

In conclusion, the LINE warning system we developed could reach the three following goals 1. Extremely low budget required 2. Notifications delivered instantly 3. Shortening the work time and boosting the efficiency

Contact:

peter@kmuh.org.tw

Bleeding of Dabigatran compared with Warfarin in the real-world setting

YEH Shing-Chih

Introduction

In a retrospective study published in 2014, the study examined the risk of bleeding among high bleeding risk elders and the result showed that dabigatran has a higher chance of causing GI bleeding than warfarin. This discovery had forced the US FDA to issue a safety alert. This alert also poses the question of whether patients should stay on dabigatran or change to a traditional antithrombotic agent such as warfarin.

Purpose/Methods

Data was collected through the healthcare information system (HIS) in a hospital from all in-patients and out-patients taking either dabigatran or warfarin from January 1, 2013, to December 31, 2016. The study excluded anyone who had a history of bleeding 3 months prior to the recruitment date. All patients were tracked for 3 years until the study end date December 31, 2016. Any bleeding events occurred were recorded after the initiation of drug therapy. The study was conducted with approval Taipei City Hospital Research Ethics Committee(TCHIRB-10604112-E).

Results

A total of 506 people were identified through raw data extraction. 42 people were excluded based on study recruitment criteria and only 464 patients were included in the study. Patients were grouped into Dabigatran group (108 people) and Warfarin group (356 people) based on the antithrombotic therapy they were prescribed. Bleeding events happened to 5 people (4.63%) in Dabigatran group and 35 people (9.83%) in Warfarin group. The application of Kaplan-Meier survival analysis to the data showed no significant difference in the bleeding ($p=0.213$) between the two groups.

Conclusions

The antithrombotic effects of Dabigatran and Warfarin are well proven in stroke prevention by many studies. Although the current study could not show any significant difference from the bleeding time between Dabigatran and Warfarin, cautions should still be exercised when antithrombotic drugs are prescribed to elderly people.

Contact: YEH Shing Chih

Taipei City Hospital

A0563@tpech.gov.tw

The Effects of Pruritus on Mood States in Dialysis Patients

LIN Chih-Yu, HSU Chen-Yuan

Introduction

The number of dialysis in Taiwan ranks first in the world, and 40 to 90% of dialysis patients suffer from skin itching. The purpose of this study was to investigate the severity of pruritus in dialysis patients and its impact on Mood States .

Purpose/Methods

A cross-sectional correlation study was used. A total of 224 valid questionnaires were collected in the hemodialysis room of a hospital in central Taiwan. The research tools include the "Basic Information Questionnaire", "Itch Severity Scale", and "Profile of Mood States-Short Form". Statistical methods included descriptive statistical, T-test, and Pearson's product moment correlation.

Results

The dialysis patients with itching accounted for 82.1%. The degree of skin itching in the PermCath dialysis was more severe than that in the autologous fistula and Gortex dialysis ($p < .001$). Itchy skin is positively correlated with mood state ($r = .41$, $p < .001$). Female mood distress is greater than male, and they are more likely to have Tension-Anxiety, Fatigue-Inertia and Confusion-Bewilderment ($F = 2.49$, $p < .001$).

Conclusions

The more severe itchy skin, the worse the mood state. People with itchy skin have more obvious mood states of Tension-Anxiety, Depression-Dejection, Fatigue-Inertia, Confusion-Bewilderment, Anger-Hostility, and poorer Vigor-Activity. Improving the patient's itching can reduce the patient's negative mood state, positive mood state can make the body healthy.

Contact: LIN Chih-Yu

Yuanlin Christian Hospital

1506295@cch.org.tw

Effectiveness of care for Purée Diet and tube feeding combine test meal in a Regional Hospital

CHANG Hsuan-Yun, LIN Yi-Fen, HSU Fan-Chun, YU Yu-Lin

Introduction

Nasogastric tube feeding is considered to provide an alternative nutritional support method for patients with dysphagia, long-term bedridden and dementia, as easy to insert, it has become a priority consideration for acute and chronic medical therapy. Patients with long-term placement of nasogastric tube lead to physical and psychological uncomfortable and reduce the quality of life. Since 2018, our hospital established a interdisciplinary team for patient with dysphagia and helped them to resume as soon as possible by oral intake

Purpose/Methods

We used the Hospital Information System (HIS) to screen the dietary orders which prescribe a purée diet or tube feeding combines test meal. After referred to the interdisciplinary team, the patients with enteral feeding route were collected and analyzed the impact of the care.

Results

total of 109 patients (48 females and 61 males) were collected from January 1 to December 31, 2020. The mean age was 77.2 ± 14.1 years, 15 with purée diet and 90 with tube feeding combined test meal. They tried to eat by mouth after 30 days of feeding and about 68% of the nasogastric tubes group can be removed after swallowing training of one week.

Conclusions

A Nasogastric tube is used for feeding when patients are having trouble of their nutritional requirements. Early referral to interdisciplinary team that can help patients early removal of nasogastric tube and are back on their feet.

Contact: HSUAN YUN Chang

Taipei City Hospital of Renai Branch

A2228@tpech.gov.tw

Reduce the negative emotional response of women to mammography examination

HSU Chia-Lin, TSAI Ming-Hui

Introduction

In the process of receiving mammography, women are uncomfortable due to the pain of breast compression, and the posture for examination is restricted, etc., which will cause women to reject the examination and desire to leave the medical environment. Therefore, before the women have a negative emotion, create a comfortable and warm examination environment or transfer their emotions through the gradual pressure of breathing to reduce their negative emotional response.

Purpose/Methods

According to the statistics of 50 women who underwent mammography examination. The first, radiographer played relaxing crystal music in the examination room, and the women's cooperation degree was significantly improved before and after the radiographer used the appeasement. Secondly, during the examination, the radiographer uses progressive compression to match the patient's breathing. When the compression plate touches the breast, ask the woman to inhale and exhale. During the exhalation process, increase the compression tightness, and then cooperate with the radiographer to complete the examination. Successful completion of the examination and the purpose of establishing a relationship with women can improve women's positive perceptions of medical examinations.

Results

After comparing use of appeasement by the radiographer, the women's negative emotions are reduced, the degree of cooperation is increased by 50%, and the clinical examination time of women is reduced by 30% to 60%. The effect is remarkable.

Conclusions

In this study, because of the uneasy caused by emotional anxiety during the mammography examination, medical staff are often confused and helpless. This method can improve the efficiency of clinical examination and shorten the waiting time of patients to be examined, and reduce the negative emotional reactions of women undergoing mammography examination. Let the women complete the inspection smoothly in a relaxed and happy atmosphere.

Contact: HSU CHIA-LIN

PENGHU HOSPITAL, Ministry of Health and Welfare

kirin101618@gmail.com

Poster Session 23: Identifying and addressing health needs in the society

Health care needs for community residents in Penghu outlying islands

TANG Rui-Yi, TSENG Shu-Ching

Introduction

The lack of medical resources and inconvenience to receive medical services in Penghu, one of Taiwan's outlying islands has caused individuals to delay seeking medical treatment. To solve lack of medical care problems, an Integrated Delivery System (IDS) plan was announced to encourage hospitals with sufficient medical and human resources to support the services needed in the outlying islands, and cooperate with local public health centers or clinics to provide localized medical services.

Purpose/Methods

The questionnaire was developed by the Family and Community Medicine department and distributed during community activities and waiting rooms. A total of 427 questionnaires were sent out to individuals over 18 years old living in Penghu with a response rate of 94.4%. The content of the data is based on descriptive statistics and related statistical analysis. The funding for this research is supported by the E-Da Hospital Project (Project No. EDAHT-108006)

Results

The researches average age over 40 years old. The most common ways to obtain medical information were from the TV (66.4%) and public health centers (60.9 %). The most common disease history was hypertension (42.6%) and 56.3% took long-term medications. The most common service used is Western Medicine (91.2%), with an increasing demand for orthopedics (20%) and internal medicine (19%). In the past six months, respondents used health services (35.7%), health examination in the past year (53%).

Conclusions

Most people can obtain health information from the correct way, most of them have no bad habits in life, but only half of the adult health examination, so the importance of health examination for public health education will increase in the future. Tools similar to the healthcare needs questionnaire can help us continue to better understand the general health status and lifestyle of the community, allowing us to plan effective strategies based on their needs.

Contact: TANG Rui-Yi
E-Da Dachang Hospital
nick820302@gmail.com

Improvement on the health literacy of the southern community elderly through the application of Mandarin Multidimensional Health Literacy Questionnaire (MMHLQ)

CHOU Chien-Chi, HU Yi-Fen

Introduction

World Health Organization states that health literacy is a kind of awareness and a social skill used to determine the motivation and ability to access, understand and use information to promote and maintain good health. Health literacy attracts more and more attention on the outcome and cost of healthcare system. However, the concept has not been popularized at the present. This study evaluates the health literacy of the community elderly and the effectiveness after course intervention.

Purpose/Methods

Purposive sampling was adopted to collect community elderly as our study objects. We use Mandarin Multidimensional Health Literacy Questionnaire (MMHLQ) to evaluate their health literacy status and analyze in 5 dimensions. We implement course intervention on the weaker dimension which last for 3 weeks and 1.5 hours per week. The courses include practice and real-life teaching. Pre-and -post test is used to evaluate the improvement on the health literacy of the elderly.

Results

A total of 43 people average age is 68.37 with 4.7% male and 95.3% female. The academic background is elementary school, 32.6%, stands on the top place, followed by junior high school, 25.6%. we can see effective improvements ($P < .05$) on the following dimensions: they can find the health information from the internet, they can judge the credibility of the health information found from the internet and they can use the health information and be ready for the disease.

Conclusions

The result of this study shows that Mandarin Multidimensional Health Literacy Questionnaire (MMHLQ) can be used to evaluate the health literacy of the elderly and as a needs assessment tool for education intervention. The health literacy of the elderly can be improved through the complete activity interventions, but the findings shouldn't be over inferred due to limited samples. We think the better solution for the further research is to expand the study scope.

Contact: CHOU CHIEN CHI
Tainan Municipal Hospital
bosmin110@gmail.com

Using Team Integration to Improve the Implementation Performance of Long-Term Care 2.0 -Taking a Regional Hospital in Taiwan as an Example

CHANG Hsiao-Hung, LIN Chi-Lind, HSU Hui-Ying

Introduction

In 2018, the elderly population was 14.5% in Taiwan, and it is expected to reach 20.6% in 2026. The hospital cooperated with the national health policy to host the plan of "Long-Term Care Ten Year Plan 2.0 (2017-2026)-Community Integrated Care Service System A" in May 2018. The plan could accelerate the "LTC 2.0 case collection rate", and provide early intervention to achieve the goals of "delaying disability" and "aging in place".

Purpose/Methods

The assessment targets were people over the age of 65 with disability, people over the age of 50 with a physical and mental disability manual certification, lonely and frail elderly who needed IADL assistance but didn't employ foreign domestic helpers, and people with CMS disability level 4 or higher in Changhua county. The cases of stroke and acute hip fracture were excluded. The implementation methods were Using HIS to conduct case screening and evaluation, cross-team cooperation with relevant departments of the hospital.

Results

We completed a total of 563 evaluations from July 2018 to November 2019. The service has been successfully connected with 394 cases (70%). But there were 169 unsuccessful (30%), 136 unwilling (80.47%), and 33 non-compliant (19.53%) cases. The number of the cases that successfully obtained services: 271 for transportation, 142 for home services, 119 for assistive devices and home accessible environment, 118 for respite care, 32 for professional services, 20 for Nutrition care, and 2 for day care. Some elders have more than two needs. Overall satisfaction $\geq 90\%$.

Conclusions

In The 563 cases (M.273,F.290) 74.78% of them had disability levels above level 4. The most services are: transportation, home service, respite, and assistive devices services. The hospital played a role as "single integrating window" to help formulating the "care plan and service link". It could reduce the time cost and care pressure of family in communication.

Comments

Family caregivers will take care of disabled elders for a long time and cause physical and mental exhaustion. In order to provide more support and care to family caregivers, they can assist in arranging people who receive care from institutions, or arrange at home service, let their families take care of them. Have the opportunity to take a break from continuous nursing duties.

Contact: CHIA WEN Lai
Show Chwan Memorial Hospital
chd7203270@hotmail.com

Reports of Initiatives „How are you?“ Home visit & „Do you have anything troubles?“ consultation

YAMAMOTO Shigeki, TOMIYAMA Momoko, MATSUMURA Norihiro, AIROKU Hiroki, KUMAKURA Masaki, FUKUBA Isao

Introduction

Our hospital, as a regional core hospital, conducts various initiatives in the community to improve the health of nearby local residents. Last year, following the 40th anniversary of the hospital's opening, we held "How are you?" Home visit & "Do you have Anything troubles?" consultation in the A area as commemorative projects. We will report the outline of our efforts and the results.

Purpose/Methods

The objectives are: (1) to clarify local problems, analyze causes, and consider measures for improvement; (2) increase the social resources available to residents; and (3) find out how local communities affect the connections between residents.(4) Develop staff's perspective on SDH As a method, 101 Employees visited 460 municipal and prefectural apartment houses, which are about 1.4 km away from the hospital. As a dialogue method, a direct dialogue or a dialogue via an intercom was performed.

Results

In the Home visit, 176 direct conversations at the entrance and 62 through the intercom. There were 222 cases where we could not talk. 70% of the population was 70 years old or older. Approximately 50% of respondents answered that they had trouble. The number of consultations at the consultation was 23. The highest number of consultations was about transportation. As a result of the two initiatives, it was decided to increase the number of community buses.

Conclusions

Area A is not far from the hospital, but it has been about 30 years since the construction of public apartments, and the inhabitants are almost aging, and there are many single-person and elderly care households. We realized that it was extremely important to go to the area to see the actual situation of the local people, to clarify what they were in trouble, and to find the solution to the problem.

Contact: KATSUYUKI Togashi
Saitama-kyoudou Hospital
k-togashi@mcp-saitama.or.jp

Factors associated with use of physical restraints on the invasive catheterized adults with home care: A cross-sectional study in south Taiwan.

HUANG Wan-Ting, KUO Yi-Chun, CHANG Pei-Chi, CHEN Wei

Introduction

Physical Restraint is usually used for the elderly for keeping them safe and preventing them from falling accident in healthcare institutes. However, restraints would reduce their autonomy and increase the injury caused by restraints. Although there were a few studies regarding restraints in healthcare institutes, the data is limited in the home-care subjects. The purposes of this study were to investigate the prevalence of physical restraints in subjects requiring homecare and its associated factors with restraints.

Purpose/Methods

A cross-sectional study was conducted, including subjects who received regular home care by registered nursing staff. Demographic data and the use of physical restraints for subjects were collected using questionnaires and interviews. Cognitive function, physical function and muscle power were also measured and recorded. The Chi-Squared and Mann-Whitney U test were used to compare the difference between the subjects with or without physical restraint. The multivariate logistic regression model was used to identify factors significantly associated with physical restraint use.

Results

Among 114 home-care elderly, 83 were under physical restraint, the rate of physical restraint was 72.8%. Multivariate logistic analysis showed that the use of nasogastric tube (Adj. OR = 5.34, 95% CI = 1.10-25.93) and higher loading (Adj. OR = 4.07, 95% CI = 1.32-12.50) were significantly associated with odds of physical restraint.

Conclusions

The prevalence of physical restraint in home-care elderly was high (72.8%). We observed the elderly with physical restraints had relatively lower level of consciousness, cognitive function, and ability for daily activity. In addition, they had fewer support from their caregivers. The exercise, health promotion, and prevention of dementia can alleviate the debilitating situation of the elderly, and further education in home caregiver, which can reduce the restraint rate of home care.

Contact: LEE Pei Hsuan

DITMANSON MEDICAL FOUNDATION CHIA-YI CHRISTIAN HOSPITAL

cych13199@gmail.com

Miles Smiles Vietnam: From Promise to Practice

CHEN Chia-Ching, CHEN Tara, JENG Seng-Feng, SHIH Hsiang-Shun, CHEN Chien-Chung, LIANG Cheng-Loong, TANG James, Tao-Qian, HSU Wen-Chen

Introduction

Cleft lip and/or palate (CL/P) is one of several complex human birth defect traits that affects approximately 1 in 500 live births in Vietnam. In addition, there is a lack of adequate medical supplies and trained surgeons to provide treatment. E-Da Hospital (Taiwan) has conducted short-term medical missions to address this issue. A long-term, sustainable solution is needed.

Purpose/Methods

E-Da initiated a revision of its medical mission program into a long-term impact, sustainable model that focused on integrating the Sustainable Development Goals (SDGs) 3, 4, 10 and 17. A strategic partnership with Operation Smiles Vietnam, external alliances, and patients/families developed the Miles Smiles Vietnam Project. This project was designed to be a teaching mission through the train-the-trainer approach; providing hands-on education-based microsurgeries and experience-based learning on patient safety/surgical skills.

Results

The outreach of this project has improved patient safety. In the past 8 years, 36 education-based microsurgeries, 402 CL/P surgeries and 17 lectures were completed, including assisting a hospital with its first microsurgery case. Local surgeons have been inspired to pursue microsurgery. This project has helped reduced the inequality gap for surgical access in vulnerable, low-income populations.

Conclusions

Short-term medical missions are critical for healthcare services in Vietnam. By revising the model to the goal of long-term impacts and sustainability, this project can be a continuous success. Hospitals have the responsibility to continuously re-evaluate their implementation and delivery process to become more cost-effective for health systems. The next step of this project is to include speech-and-language therapy.

Contact: CHEN Chia-Ching

E-DA Hospital

ed103221@edah.org.tw

Effective weight-loss course through integrated resources without medicine provided by a medical center in Northern Taiwan

CHEN Chiayu, WANG Jia-Kang

Introduction

WHO indicated that both overweight and obesity have shown a marked increase over the past 4 decades. At least 2.8 million

people die each year as a result of being overweight or obese. In Taiwan, the prevalence of overweight and obesity is 45.4%. The purpose of this study is to test the effectiveness of a health professional-delivered intervention for weight loss.

Purpose/Methods

The intervention was designed for overweight and obese adults. It consisted of 6-week course that included didactic health education (covering basic medical knowledge of weight loss, nutrition, and fitness skills) in the hospital and physical exercises twice a week in the gymnasium, which provided students a better space and environment for group sports. We employed a single-group, pre- and post-test design to assess the effectiveness of the intervention. Assessed outcomes included weight, waistline, body fat percentage, satisfaction, and self-efficacy.

Results

Eighty-three participants completed the intervention program with valid data. Before the intervention, 60.7% of participants exercised less than 3 times a week. After the intervention, 94.4% of participants exercise more than 3 times a week and felt confident about meeting the goal. Using Paired Sample t test, we found that weight reduction was statistically significant with a mean reduction of 2.0Kg as a result of the intervention ($p < 0.01$). Waistline and body fat percentage reduced significantly after the intervention ($p < 0.01$).

Conclusions

Results showed the intervention could enhance the participants' intention to exercise regularly and have balanced diet. The doctors and nutritionists in the hospital and the fitness instructors in the gymnasium help the participants lose weight and improve their self-efficacy. The 6-week course was the effective way to allow participants to achieve good weight loss results and improve their fitness skills and dietary knowledge.

Contact: CHEN Chia-Yu
Far Eastern Memorial Hospital
b508100045@tmu.edu.tw

The effects of integrated outpatient services for people with disabilities

LIU I-Hsiu, HUANG Wan-Yun, TUAN Sheng-Hui, SUN Shu-Fen, LI Min-Hui, CHEN Shu-Qi, CHEN Jin-Shuen

Introduction

According to the questionnaire of ministry of interior, Taiwan, 68.8% of people with disabilities had regular visits for doctors. However, 57% of the population had difficulties to visit the hospital independently. They encountered problems such as registration in the hospital counter or traffic issues. In 2014, We established integrated outpatient services for people with disabilities in our hospital.

Purpose/Methods

In this service program, a case manager assessed patients with disabilities and arranged appointment to medical specialties, including internal medicine, physical medicine and rehabilitation, psychiatry and more, according to patients'

needs. The aim of the service program was to improve the medical quality, to overcome the obstacles during medical visits for patients with disabilities, and to save patients' money.

Results

From June 2015 to June 2017, there were 2325 people received service counselling and 2279 people applied for the integrated system annually. (figure 1) For age distribution (figure 2), most patients were between 51 and 60 years of age. For disability classification, most of the patients were diagnosed with neuromuscular deficits and related disabilities (figure 3). In all, there were 689 doctor visits annually. The outpatient clinic specialties patient visited was 1.45 in average. Physical medicine and rehabilitation visits accounted the most. 78 doctor (11.32%) visits were reported. For health-related behavior analysis in the people with disabilities, smoking accounts for 23%, alcohol drinking 13.5% and betel nuts 5% (figure 5). For disease analysis, hypertension accounts for 18.8% (figure 6). For patients' feedback, satisfaction rate was over 90% in the questionnaire of integrated system.

Conclusions

The effects of integrated outpatient services for people with disabilities in Taiwan showed high satisfaction and save time and medical expenditure of patients. This service can enhance health service quality of people with disabilities.

Contact: LIU I-Hsiu

Department of Physical Medicine and Rehabilitation, Kaohsiung Veterans General H
bruce_pelagia@msn.com

The effect of an EBM-based Bundle Care Model on falls in hemodialysis patients

LIANG Shu-Chien, LIN Wu-Hsuan, WU Pi-Keng, YAO Wen-Chen, LIN Ching-Feng, LUO Jiing-Chyuan, LI Ling-May

Introduction

Hemodialysis patients are at high risk of falling as a result of vascular calcification, cardiovascular disease, diabetic peripheral neuropathy and muscle weakness. Patients received a total of 25,211 hemodialysis sessions per year from our center in 2019. In total, 53 patients fell (2.1%), two fell following dialysis and 51 fell at home. Only 5.65% of patients do foot workouts on weekdays. The objective of this study was to reduce fall using an evidence-based medical care (EBM) model for hemodialysis patients.

Purpose/Methods

A total of 177 hemodialysis patients were selected in 2020. We intervened in elastic buckle exercises for muscular strength of patient's lower limbs. It is carried out for 30 minutes during hemodialysis. To reduce the occurrence of falls, a complex bundle care model, which consisted of a series of educational lectures, peripheral vascular disease screening, using Pulse Wave Velocity and Ankle-Brachial Index to find peripheral arterial occlusion and early intervention. The foot wound care training for patients were also implemented.

Results

The EBM-based grouped care model was implemented for a 12-month period. The density of falls was 2.10/1000 at the pre-intervention stage, and 0.36/1000 at the post-intervention stage ($p < 0.0001$). The accuracy of resistance exercises during hemodialysis and the patient confidence rate in KAP for prevention falls were significantly increased, from 20.7% and 33.1% in the pre-intervention stage to 81.2% and 75.8% in the post-intervention stage, respectively. We observed a reduction in hypotensive episodes during hemodialysis ($p < 0.008$).

Conclusions

An EBM-based bundle care model combined with PWV (Pulse Wave Velocity) and ABI (Ankle-Brachial Index) examination, resistance exercises of patient's lower limbs, foot wound assessment and care training for patients, was effective in reducing the falls density, enhancing the accuracy of resistance exercises during hemodialysis, and prompting the patient confidence in attitude and practice (KAP) for falls prevention in a hemodialysis room. Resistance exercises during dialysis can also reduce hypotensive events.

Contact: LIN Ching-feng

Keelung Hospital Ministry of Health and Welfare

chingfeng01@gmail.com

A Project to Improve the Completion Rate of Blood Transfusion Consent in Outpatient Clinic Settings

YANG Ching-Yu, CHANG Wen-Lin, JIH Yi-Rong

Introduction

It is a general principle to obtain a valid blood transfusion consent from patients before they receive blood transfusion. However, the completion rate of entire consent form is unsatisfactory in our institute.

Purpose/Methods

Our institute started to use the electronic medical record (EMR) system in 2009 but blood transfusion forms were still signed in paper form. We initiated a project to improve the completion rate of transfusion consent forms. Our project involved a step of uploading transfusion consent forms to the EMR system and a check-up procedure for the form completion before the uploading, which were performed immediately after a patient was given a transfusion order at the outpatient clinic.

Results

Retrospective evaluation of the completion rate of transfusion consent forms before the project was only 16.6% on average. The major reasons for the incomplete filling of the form were a lack of standard check-up procedure and neglecting check-up due to too busy with other duties. After the project, the completion rate of blood transfusion consent forms reached 100% and the time spent on checking whether a patient had signed a transfusion consent form decreased to 30 seconds on average.

Conclusions

A standard procedure involving check-up of form completion and uploading the form to the EMR system has successfully improved the completion rate of blood transfusion consent on the hard copy at the outpatient clinic.

Contact: YANG Ching-Yu

National Taiwan University Hospital

008530@ntuh.gov.tw

Effectiveness of reducing postoperative delayed the rate of get out of bed in patients with lower limb fractures

LI Tsung-Han, LIU Hsiao-Ying, LIN Ya-Xuan, CHIOU Shwu-Jin, CHEN Shu-Nuen, TSAI Yi-Fan

Introduction

Our unit is an orthopedic ward of a regional hospital in Taipei, Taiwan. A survey of 19 patients in June 2019 found that the rate of delayed getting out of bed after surgeries for fracture of lower limb was 78.9%. The main reasons analysis were that patients felt wound pain of 27.6% and muscle weakness of 20.7%. The study was aimed to design strategies to reduce the rate of delayed out of bed for patients with fracture of lower limb.

Purpose/Methods

The study period was from July 2019 to December 2020. First, the appropriate medicines and treatments will be discussed in the interdisciplinary team communication meeting based on the patient-centered. Discuss with rehabilitation therapists, and use image memory method to design a leaflet for muscle power training exercises on the bed. Provide instruction leaflets and video demonstration teaching within 24 hours after surgery. Finally, make a muscle power training exercises checklist to confirm that the patients actually got out of bed.

Results

After implementation of strategies, a total of 303 patients with fracture of lower limb surgery were collected. According to the results, there were 60 people who failed to get out of bed within 24 hours after the removal of the drainage tubes, and the rate of delayed out of bed decreased from 78.9% to 20%. Patients and the main caregivers were 98% satisfied with instruction leaflets and teaching videos.

Conclusions

The Patients with lower limb fracture surgery begin to perform rehabilitation exercise in the bed within 24 hours after surgery that could increasing muscle power strength, reduce joint swelling and pain. Patients with lower limb fracture surgery ought to get out of bed early when they remove the drainage tubes, and recover their limbs joint mobility and daily life as soon as possible, also could reduce the number of hospital stays and improve the quality of life.

Contact: TSAI YI-FAN

Taipei City Hospital, Young Ming Branch

b1717@tpech.gov.tw

Real-world experience of sustainable therapeutic effect of traditional Chinese medicine on semen quality of patients with infertility

CHANG Chiung-Hung, WANG Shu-Chiu, TSAI Liang-Miin, SU Pei-Fang, WANG Shu-Chen, HSU Yuan-Man

Introduction

Fertility is one of the most important health issues in global reproduction. Male infertility is a multifactorial disease that is responsible for approximately 50% of infertile cases. Poor semen quality is a major factor of male infertility. The study aimed to investigate the efficacy of traditional Chinese medicine (TCM) on semen quality in infertile men.

Purpose/Methods

This study was approved by the Institutional Review Board (IRB) of the Show Chwan Medical Foundation (IRB No. 1080204). This is a retrospective study, outpatient records between January 2013 and December 2018 at Tainan Municipal Hospital in Taiwan were retrieved. This study included patients diagnosed with male infertility with ICD-9th code: 6069. The retrieved data included age, infertility duration, body mass index, and semen characteristics (ejaculate volume, pH value, concentration, morphology, and total motility). Data analyses included descriptive statistics, inferential statistics. All data analyses were performed using statistical software R 3.6.3 for Windows. For two-sided tests, statistical significance was set at $p < 0.05$.

Results

125 patients received TCM therapies for 3 and 6 months; furthermore, 73 patients were non-TCM users. Compared with the control group, the TCM users showed a significantly improved volume ($p = 0.012$), total motility ($p < 0.001$), morphology ($p < 0.001$), and concentration ($p < 0.001$). Approximately 58.40% and 75.76% of infertile men measure up to the 2010 WHO guidelines after 3, and 6 months of TCM intervention, respectively. Furthermore, there were no adverse events.

Conclusions

Our findings support the clinical potency of treatment with TCM in infertile men, especially for improving sperm motility, concentration, volume, and morphology. Our data also support the possible use of the TCM as a therapeutic strategy that can improve sperm quality in infertility patients.

Contact: CHANG Chiung-Hung

Tainan Municipal Hospital (Managed By Show Chwan Medical Care Corporation)
changch99@gmail.com

Poster Session 24: Environmental sustainability, climate change and health

As the improvement of hot water and steam of our hospital

LAN Cheng Hsien, TSIA Wen Huey

Introduction

The climate change influence human health and disease which already becomes the important topic for discussion. To maintain the hospital daily operation with certain energy without impact the quality of medical treatment and reduce pollution which will be our important and actively involving goal. We improved current living hot water and disinfection steam.

Purpose/Methods

We have monitored the daily operation system of hot water consumption upto 20 tons and steam usage amounting to 424kg/hr in our hospital since year 2018. With the data, we have adopted below improvement strategies 1.Examine the efficiency of the old boiler system and energy consumption. 2.Survey the design of other alternatives for hospital hot water and steam system. 3.Redesign the system by purchasing new equipments. 4.Change the original diesel fuel to less pollution and energy saving nature gas.

Results

The original design of 2000 kg/hr boiler system for our hospital produced pollution and caused a waste of energy. We redesign the system of living hot water and disinfection steam way of supply changing the model of boiler system to adopt nature gas instead of diesel fuel. According to the data collected, the carbon dioxide emissions decrease by 61% and save operation cost up to 43%.

Conclusions

The way of medical care, the patients demanding are chaining. Progress of the hospital construction, and electromechanical technology. Knowing that the experience of hot water steam improvement, we need to review the hospital design and equipment which suitable for current situation or not. Seeking the changing strategy to reduce hospital operation pollution. The saving cost can also support we continue improve the environment and provide better medical care condition.

Contact: SIOU LING jhong

Taipei Municipal Gan-Dau Hospital
sljhong@gandau.gov.tw

The IV BAG Clean-Up Project from Chiayi Christian Hospital

SU Bao-Yuan, LIAO Chieh-Wen

Introduction

According to the statistics of the Department of Environmental Protection, the biological medical waste produced by the

hospital today accounts for about 15-25% of the total waste of the industrial waste, As the elevation of waste processing cost, the increase of hospital operating costs proportion is expected. In order to reduce hospital's medical waste process costs , this study aims to achieving the benefits of waste and costs reduction.

Purpose/Methods

This project is to review the IV BAG waste produced from the nursing ward. In the process of patient care, it is common that some fluids are often left in the IV set, resulting in an increase in the weight of the medical waste, and resulting in increasing the processing cost. After discussion with the nursing ward and the waste processing agency, we collected the used IV BAG waste independently, and sent to the crushing area for crushing to achieve the waste fluids emptying.

Results

After one month of implementation, it was found that the IV BAG waste output of the hospital ward was effectively reduced by 30 kg / month. It is estimated a monthly 1.11 tons of reduction in medical waste with hospital-wide implementation of 37 nursing stations, . There will be an estimated annual reduction of 13.32 tons of biological medical waste production. The estimated annual process cost reduction will be NT\$666,000. It effectively achieved the benefits of waste and costs reduction.

Conclusions

As the tightening of reimbursement policy of health insurance, how to increasing income and saving cost is the basic policy for hospitals. With innovative thinking of using of existing equipment, plus adopting lean management techniques, we effectively not only reduced hospital biomedical waste but also increase hospital cost saving.

Contact: LEE Pei Hsuan

DITMANSON MEDICAL FOUNDATION CHIA-YI CHRISTIAN HOSPITAL

cych13199@gmail.com

Index

A

ABLÖSCHER Miriam · 200
 AGOSTINI Claudio · 61
 AGUZZOLI Cristina · 31, 40, 45
 AHN Alan · 228
 AIROKU Hiroki · 232
 ALI Shahzad · 19
 ANDREATTI Maurizio · 45
 ANTOÑANZAS Elena · 42
 APPOLONI Pamela · 162
 APPOLONI Sara · 162
 ARAKI Takumi · 192
 AZZOLINA Maria Carmen · 44

B

BAKIDES Sofoclis · 13
 BASCOUL Marie · 31
 BATTEUX Frederic · 6
 BECCI Gioia · 162
 BELEŠOVA Romana · 33
 BEN ION Ilana · 41
 BERKANE Khalida · 31
 BHANDARI Ashish · 79, 135, 143, 148, 149
 BIBI Irit · 41
 BINDER Siegfried · 22
 BOIETTI Edoardo · 20
 BOMALIYAMU Aimaiti · 79, 135, 143, 148, 149
 BORDENAVE Lauriane · 31
 BORELLI Paola · 20
 BRABCOVÁ Iva · 35
 BRIANSÓ Maria · 25
 BROMBERG Noga · 119
 BRONNER Karen · 43
 BROSOLO Piero · 40

C

CAMILLI Andrea · 31, 45
 CAPOLONGO Stefano · 23
 CARRETIER Julien · 27
 CECCHI Adriana · 40, 45
 CENCI Luigina · 162
 CHAN Chikyi · 175
 CHAN Hsin-Lung · 104, 127, 185
 CHAN Hui-Ya · 52, 54, 65
 CHAN K K · 153
 CHANG Betty Chia-Chen · 77, 141
 CHANG Cheng Yu · 52, 100
 CHANG Chia Ming · 179
 CHANG Chia-Chin · 151
 CHANG Chia-Fang · 158

CHANG Chia-Mei · 216
 CHANG Chiao-Ling · 215
 CHANG CHIEN Yu-Chen · 193, 202
 CHANG Chien-Hsin · 207
 CHANG Chih-Ming · 158, 213
 CHANG Chi-Hsuan · 179
 CHANG Chiu-Jung · 200
 CHANG Chiung-Hung · 171, 236
 CHANG Chiu-Rung · 199
 CHANG Fu-Sheng · 130, 131
 CHANG Hao-Chih · 229
 CHANG Hao-Yuan · 139
 CHANG Hsiao-Hung · 187, 232
 CHANG Hsin-Fei · 193, 202
 CHANG Hsing-Yi · 106, 166, 201
 CHANG Hsin-Hsin · 64
 CHANG Hsin-Yi · 170
 CHANG Hsuan-Yun · 230
 CHANG Hsu-Chaio · 75
 CHANG Huang-Yu · 85, 91, 131
 CHANG Hui-Ju · 107, 111
 CHANG Hui-Ying · 112, 115
 CHANG Jung-Chen · 93
 CHANG Kai-Ting · 100
 CHANG Kuang-Hsi · 118
 CHANG Li-Chen · 213
 CHANG Li-Fang · 13
 CHANG Mei Chi · 198
 CHANG Mei-Fang · 170
 CHANG Mei-Yen · 138
 CHANG Pei-Chi · 233
 CHANG Shin-Tsu · 83
 CHANG Shu-Min · 143, 144, 206
 CHANG Su-Feng · 103
 CHANG Wen-Lin · 235
 CHANG Ya-Ting · 165
 CHANG Yaw-Wen · 86, 87
 CHANG Yi-Hsiu · 99
 CHANG Yuanmay · 198, 218
 CHANG Yu-Chen · 78
 CHANG Yu-Ho · 207
 CHANG Yu-Wen · 194
 CHANG-TSAI Ting-Yu · 177
 CHAO Shu Yuan · 84
 CHAO Yu-Hsien · 128
 CHARAMIS Angelos · 13
 CHEN Anthony · 74
 CHEN Changhua · 48
 CHEN Chang-Hung · 212
 CHEN Chia-Ching · 233
 CHEN Chia-Hui · 180, 185
 CHEN Chiayu · 233
 CHEN Chien-Chung · 233
 CHEN Chien-Ju · 133
 CHEN Chih-Dao · 10
 CHEN Chih-Yin · 210
 CHEN Ching-Min · 16

- CHEN Chin-Ling · 72
 CHEN Chi-Shen · 28
 CHEN Chiu-Chen · 216
 CHEN Chu-Chin · 163
 CHEN Guan Ting · 100
 CHEN Heng-Hui · 152, 164
 CHEN Hong Jhe · 30, 146
 CHEN Hsiu Ling · 217
 CHEN Hsiu Shan · 82
 CHEN Hsiu-Hua · 108
 CHEN Hsiu-Ju · 184
 CHEN Hsiu-Ling · 224
 CHEN Hsiu-Yin · 92
 CHEN Hui Chi · 153
 CHEN Hui Mei · 109
 CHEN Hui-Chen · 204
 CHEN Hui-Chuen · 105
 CHEN Hui-Chun · 154
 CHEN Hui-Fang · 132, 218
 CHEN Hui-Lan · 96
 CHEN Hui-Ling · 88
 CHEN Huizhen · 91
 CHEN Hung-Hui · 65
 CHEN I-Ling · 186
 CHEN Jane-Lin · 96
 CHEN Jean-Shi · 112
 CHEN Jen-Chich · 83
 CHEN Jesse · 94
 CHEN Jiann-Lin · 136
 CHEN Jin-Shuen · 11, 28, 72, 83, 88, 95, 112, 114, 115, 146, 159, 163, 203, 223, 234
 CHEN Jiyuen-Tieng · 128, 221
 CHEN Jung · 68
 CHEN Jung-Yueh · 146
 CHEN Ko-Hua · 90
 CHEN Kuan-Hung · 74, 102
 CHEN Kuei-Hua · 105
 CHEN Li Yueh · 137
 CHEN Li-Chen · 79
 CHEN Li-Hua · 152
 CHEN Li-Jyn · 212
 CHEN Li-Lin · 95
 CHEN Ling-Sui · 158
 CHEN Li-Syueh · 14
 CHEN Mao-Wen · 77
 CHEN Mei Chun · 145
 CHEN Mei Ju · 107
 CHEN Mei-Feng · 170
 CHEN Mei-Tsu · 150
 CHEN Mei-Yu · 223
 CHEN Michael S. · 70
 CHEN Pei-Hao · 194
 CHEN Pey-Rong · 105
 CHEN Pin-Hao · 68
 CHEN Pin-Jung · 201
 CHEN Ru Lan · 194
 CHEN Ru-Yih · 112, 115, 136
 CHEN Sheng-Pyng · 134
 CHEN Shih-Chia · 191
 CHEN Shu-Chen · 101
 CHEN Shu-Chuan · 176
 CHEN Shu-Fen · 183, 199, 209
 CHEN Shu-Jane · 200
 CHEN Shu-Lin · 73
 CHEN Shu-Nuen · 101, 110, 111, 160, 184, 235
 CHEN Shu-Ping · 208
 CHEN Shu-Qi · 234
 CHEN Shu-Yen · 220
 CHEN Shu-Yi · 134, 208
 CHEN Sih-Hua · 158
 CHEN Sue-Hui · 220
 CHEN Sung-Yun · 62, 103, 160
 CHEN Su-Zu · 204
 CHEN Szu Yu · 82
 CHEN Tara · 233
 CHEN Wan-Hsin · 133
 CHEN Wei · 184, 213, 233
 CHEN Wei-Hui · 101
 CHEN Wei-Liang · 87
 CHEN Wei-Sheng · 119
 CHEN Wen-Chieh · 136, 177
 CHEN Xing-Jia · 64
 CHEN Xsiao-Ting · 113
 CHEN Ya-Fang · 62, 160
 CHEN Ya-Ling · 223
 CHEN Ya-Mei · 185
 CHEN Yen-Ya · 93
 CHEN Yi Chen · 86
 CHEN Yi Ching · 94, 112
 CHEN Yi-An · 77
 CHEN Yi-Cheng · 50
 CHEN Yi-Ching · 48
 CHEN Yi-Chun · 166
 CHEN Yi-Ju · 155, 171
 CHEN Yiling · 218
 CHEN Yi-Ting · 77
 CHEN Yu Huei · 217
 CHEN Yu-Chen · 139
 CHEN Yu-Ching · 204
 CHEN Yu-Chun · 221
 CHEN Yu-Hsuan · 77
 CHEN Yu-Hua · 216
 CHEN Yu-Ju · 194
 CHEN Yu-Rong · 81
 CHEN Yu-Shan · 10, 11
 CHEN Yu-Ting · 197
 CHENG Bor-Wen · 14
 CHENG Cheng Chang · 133, 163
 CHENG Chien-Hsiang · 82
 CHENG Chien-Hung · 156, 229
 CHENG Chin-Chia · 156
 CHENG Ching-Ming · 205, 216
 CHENG Heng-Heuwi · 53
 CHENG Hsiu-Rong · 145, 175
 CHENG Hsu-Sheng · 150
 CHENG I-Chin · 57, 151
 CHENG I-Ting · 11
 CHENG Jin-Shiung · 114, 115, 136

CHENG Min-Fen · 217
 CHENG Shiou-Shiung · 121
 CHENG Suzu · 91
 CHENG Sze Yee · 153
 CHENG Tsai-Yun · 113
 CHENG Tsung-Ping · 121
 CHENG Wan-Yi · 226
 CHENG Yung An · 142
 CHENG Yu-Yang · 38
 CHEONG Magdalin · 42
 CHI Li-Kang · 174
 CHI Shu-Fen · 137
 CHIA Shu-Li · 8, 70, 181, 182
 CHIANG Chia-Chi · 214
 CHIANG Chia-Ling · 77
 CHIANG Chien-Dai · 17
 CHIANG Hui Chaun · 84
 CHIANG Hui Chung · 86, 137
 CHIANG Hui-Shan · 226
 CHIANG Tsay-I · 118
 CHIANG Tsui-Ling · 88
 CHIANG Tzu-Hsuan · 107
 CHIANG Wen-Jen · 90
 CHIEN Sou-Hsin · 81
 CHIEN Li-Yu · 61
 CHIEN Mei-Chen · 122
 CHIEN Pei-Li · 57
 CHIEN Son-Hsin · 170
 CHIEN Sou-Hsin · 82, 102, 173, 219
 CHIEN Ya Yu · 126
 CHIEN Ying Chun · 126
 CHIH Hsu-Ching · 211
 CHIODO Laura · 148
 CHIOU Chou-Ping · 205
 CHIOU Han-Wei · 212
 CHIOU Kuan-Hua · 168, 191
 CHIOU Shwu-Jin · 235
 CHIU Guei-Fen · 154
 CHIU Hui-Ping · 157
 CHIU Kuei-Fen · 211
 CHIU Su-Erh · 79
 CHLOUBOVÁ Ivana · 33
 CHO Mon Der · 123, 187
 CHOI Gippeum · 228
 CHOI Saegyeol · 129
 CHOI Sunmi · 228
 CHOI Suyoung · 63
 CHOO Hye-Bin · 228
 CHOU Chi-Chun · 10, 11, 53, 185
 CHOU Chien-Chi · 212, 218, 231
 CHOU Chun Yun · 164
 CHOU Hui-Ling · 220
 CHOU Hung-Chieh · 48
 CHOU Ya-Hui · 16
 CHOU Yi-Jiun · 225
 CHOU Yi-Wei · 92
 CHOU Yun · 185
 CHU Chan-Man · 223
 CHU Chia-Hui · 214

CHU Ching-Lan · 165
 CHU Chiu-Hua · 181
 CHU I-Chen · 176
 CHU Mei-Ling · 93
 CHU Wan-O · 56, 59, 97, 155
 CHU Yu-Jen · 114
 CHUANG Fu-Lien · 95
 CHUANG Pao-Yu · 59, 60
 CHUANG Shu-Ting · 81, 82, 102, 170, 173, 219
 CHUANG Yun Chieh · 187
 CHUANG Yun-Shiuan · 182
 CHUNG Chia-Ju · 211
 CHUNG Wen-Jean · 205
 CHUNG Yong-Chuan · 15, 37, 102
 CHUNG Yuan Fang · 179
 CHUO Ying-Hsiang · 8, 130, 151, 221
 CNEMG Ching-Ming · 215
 CONTE Alessandro · 31, 40, 45
 CORSI Daniela · 20
 COSTAMAGNA Graziella · 44
 CUSSIGH Elena · 45
 CZASCH Caroline · 45

D

DAI Chia-Yen · 9, 21, 60
 DALL'ACQUA Maurizio Gaspare · 44
 DE GANI Saskia Maria · 38
 DE MONTE Ariella · 31, 40, 45
 DELALOGUE Suzette · 31
 DERENTHAL Marit · 222
 DOHERTY Kirsten · 46
 DOI Nao · 161
 DONG WN · 15
 DORNER Thomas E. · 30
 DREXEL Michaela · 34
 DU Yi-Ju · 110
 DUH Shi-Rong · 85

E

ELGSTRAND Maria · 24
 ENOMOTO Akemi · 173
 ETO Tomoko · 192

F

FAN CHIANG Yu-Chen · 81, 82, 102, 173
 FAN Sheng-Yu · 181
 FANG Chih-Yuan · 188
 FANG Chun-Kai · 18, 78, 90, 109, 124, 125, 126, 195, 196, 201, 203
 FANG Szu-Ting · 205
 FANG Wei-Hui · 148
 FANG Wen-Hui · 87, 226
 FATAH Abdul · 19

FEDELE Roberta · 31, 40
 FENG Hsin-Chun · 154
 FERNÁNDEZ Mònica · 25
 FERVERS Béatrice · 27
 FILAUSOVÁ Drahomíra · 33
 FILAUSOVÁ Drahomíra · 33
 FILHABER Aliza · 20, 41
 FILKA Jozef · 35
 FITZPATRICK Patricia · 21, 46
 FIUMANÒ Pino · 44
 FLYGARE WALLÉN Eva · 28
 FORNERO Giulio · 20, 64
 FRASCIONE Giulia · 162
 FU Chao Yang · 145, 216
 FU Wen-Cheng · 155
 FU Yun-Ching · 67
 FUJINO Mami · 128
 FUJISHIRO Maki · 128
 FUKUBA Isao · 192, 232

G

GANDOLFI Chiara · 40
 GASPARAKI Maria · 13
 GELISANGA Maribeth Anne · 35
 GIACOMINI Luisa · 31
 GIEDRIKAITE Rytė · 56
 GILLIGAN Christopher · 143, 149
 GILTAY Erik J · 61
 GINTOLI Irene · 20
 GIRARD Emeline · 27
 GOBBATO Carlo Antonio · 31
 GODEFROY Clémence · 29
 GRÖNE Oliver · 6
 GUGGLBERGER Lisa · 38
 GUNG Su-Fen · 216
 GUO Hua-Jing · 121

H

HABERECHT Olaf · 222
 HAGA Atsuko · 173
 HANSEN Elisabet · 28
 HAO Ching-Jung · 83
 HARLID Ralph · 18
 HE Su-Ye · 64
 HEO Eunyoung · 63
 HERNANTES Naia · 42
 HIRASHIMA Kumiko · 87
 HIROTA Noritake · 128
 HO Chia Ling · 123
 HO Hsuan · 103, 160, 165
 HO Li-Chuan · 54
 HO Lun-Hui · 79
 HO Shih-Chun · 181
 HO Su-Chin · 89
 HO Yu-Mei · 96

HOJO Yuya · 128
 HÖLLTÄ Jessica · 28
 HOLROYD E · 15
 HONG Jia-Ling · 134
 HONG Jiyeong · 170
 HONG Wei-Wei · 139, 146
 HONG Yi Jia · 41
 HOU Chun-Mei · 111, 184
 HOU Chun-Yen · 38
 HOU Jung-Ying · 213
 HOU Yu-Hsueh · 198, 218
 HSIAO Fang-Lan · 121
 HSIAO Feng-Chi · 77, 124
 HSIAO Han Yi · 126
 HSIAO Hsueh-Wen · 78, 109, 201
 HSIAO Miao Ping · 145
 HSIAO Pei-Chen · 154
 HSIAO Su-Hui · 85
 HSIAO Wei-Ling · 50
 HSIAO Wei-Nung · 90
 HSIAO Yu-Wen · 177
 HSIEH Chia-Ling · 110
 HSIEH Chia-Min · 166
 HSIEH Chia-Ying · 52, 54
 HSIEH Fu-Chiao · 220
 HSIEH Hui-Hsia · 82, 102
 HSIEH Li-Hua · 101, 165
 HSIEH Pei-Chi · 219
 HSIEH Pei-Yin · 50
 HSIEH Ping-Lun · 132
 HSIEH Suh-Ing · 16, 137
 HSIEH Tsai-En · 157
 HSIEH Wen-Tsui · 134
 HSIEH Yi-Lin · 147
 HSIEH Yu-Ho · 69, 70
 HSING Hui-Fen · 191
 HSIUNG Hsiao Ching · 207
 HSIUNG Yvonne · 90
 HSU Chen-Yuan · 229
 HSU Chia-Chien · 111, 184
 HSU Chia-Hui · 13
 HSU Chia-Lin · 230
 HSU Chieh-Kuan · 221
 HSU Chih-Fen · 166
 HSU Chih-Hung · 104
 HSU Fan-Chun · 230
 HSU Honda Hsu · 37
 HSU Hua-Yin · 172, 173, 215
 HSU Hui-Chen · 90
 HSU Hui-Fang · 99
 HSU Hui-Mei · 219
 HSU Hui-Ping · 170
 HSU Hui-Ying · 187, 232
 HSU Hung-Yi · 8, 14, 20, 168, 182, 191, 192, 197, 220, 225
 HSU Man-Ling · 156
 HSU Mei-Er · 151
 HSU Pei-Jung · 148, 226
 HSU Ping-Ying · 49

- HSU Su-Chun · 157
 HSU Tse-Pin · 100
 HSU Tzu-Chuan · 80
 HSU Wan-Ling · 53
 HSU Wen-Chen · 233
 HSU Yuan-Man · 171, 236
 HSU Yu-Ping · 114
 HSUEH Kuang-Chieh · 30, 112, 115, 146
 HU Fang Wen · 179
 HU Mei-Lien · 61
 HU Nai-Fang · 216
 HU Wen-Hsin · 184
 HU Yi-Fen · 218, 231
 HUA Ko Hsin · 176
 HUA Shih-Che · 150
 HUAI Xuan-Huang · 69
 HUANG Bao-Hwa · 93
 HUANG Chi Chang · 179
 HUANG Chi Wen · 224
 HUANG Chieh-Ling · 114, 115
 HUANG Chien-Cheng · 181
 HUANG Chih-Ling · 144
 HUANG Ching-Fen · 48, 50
 HUANG Chiung Hua · 109
 HUANG Chiung-Hsuan · 162
 HUANG Chi-Yen · 182
 HUANG C-Y · 126
 HUANG Ho-Yi · 156
 HUANG Hsiao-Ling · 160
 HUANG Hsin-Jou · 157
 HUANG Hsiu-Chuan · 156
 HUANG Huai-Xuan · 70
 HUANG Huei-Kuan · 121
 HUANG Huei-Ling · 14
 HUANG Hui-E · 183
 HUANG Hui-Ting · 8, 29, 57, 70, 80, 120, 128, 151, 221
 HUANG Jui-Fang · 150
 HUANG Kuei-Ying · 165
 HUANG Kui-Chen · 198
 HUANG Liang-Chang · 219
 HUANG Liang-Sheng · 76, 98
 HUANG Li-Ching · 101, 113, 122
 HUANG Mei-Fen · 108
 HUANG Mei-Ling · 99, 110
 HUANG Ming-Jen · 136, 213
 HUANG Ming-Ren · 68, 83, 86, 122, 127, 157, 177
 HUANG Min-Hsin · 37
 HUANG Min-Jen · 217
 HUANG Pao-Hua · 74
 HUANG Pei-Ju · 223
 HUANG Pei-Lin · 166
 HUANG Qiaoying · 133, 163
 HUANG Shao Tsung · 145, 216
 HUANG Shu-Ping · 113
 HUANG Su-Cheng · 62
 HUANG Tsu-Hsueh · 104
 HUANG Tzu-Hsiu · 62
 HUANG Tzu-Ya · 112, 115
 HUANG Wan-Ju · 115
 HUANG Wan-Ting · 233
 HUANG Wan-Yun · 83, 163, 223, 234
 HUANG Wei-Hsin · 141, 216
 HUANG Wen-Ho · 218
 HUANG Wen-Yi · 210
 HUANG Xin-Yi · 76, 98
 HUANG Yan-Qiu · 95
 HUANG Yao-Chung · 174
 HUANG Yao-Hui · 64
 HUANG Ya-Wen · 58, 168, 191
 HUANG Yi-Chun · 165
 HUANG Yi-Ling · 69, 168
 HUANG Yi-Luan · 28
 HUANG Yu-Chow · 223
 HUANG Yu-Hcia · 176
 HUANG Yu-Hsin · 79
 HUANG Yu-Ming · 219
 HUANG Yun-Fang · 71
 HUANG Yu-Wen · 92
 HUF Wolfgang · 200
 HUI N · 153
 HUI Ping-Hsu · 173
 HUNG Bin-Cong · 143, 215
 HUNG I-Wen · 150
 HUNG Jia-Lu · 90
 HUNG Li-Ju · 136
 HUNG Ling-Yu · 10, 11, 53, 185
 HUNG Pin Chen · 203
 HUNG Shan-Ching · 182
 HUNG Shih-Yu · 182
 HUNG Ta-Chuan · 90
 HUNG Te-Chin · 49
 HUNG Yi-Ning · 202
 HUNG Yun-Hsiu · 198
 HUNG Yun-Ying · 145
 HWANG Lee-Ching · 141, 185
 HWANG Shang-Jyh · 158
-
- I**
 IBAÑEZ Rocío · 25
 ICHIKAWA Kiyomi · 173
 IMAMURA Shotaro · 141
 IMOLI Maria · 61
 INIESTA Cristina · 25
 IRIARTE-ROTETA Andrea · 42
 ISHII Momoko · 79, 135, 148
 ITOU Hiroe · 192
 ITOU Jyujyu · 173
-
- J**
 JAKS Rebecca · 38
 JAN Chyi-Feng · 54, 169
 JAN Shin-Lung · 191
 JANG Jie-Yun · 205
 JANG Juyoung · 19

JAO Yi-Ching · 75
 JÄRVI Leea · 32
 JAU Pin-Yu · 197
 JEN Kai-Lin · 128
 JENG Seng-Feng · 233
 JEONG Yejin · 228
 JHAN Ya-Ting · 81
 JHANG Chae Yoon · 135, 148
 JHAUNG Yi-Ling · 41
 JI Chuchu · 42
 JIAN Wan Xun · 52
 JIANG Xue Pin · 52
 JIH Yi-Rong · 235
 JIN Bi-Xia · 130
 JO Gahyeon · 228
 JO Hwa Yeon · 226
 JOU Hei-Jen · 57
 JUANG Wang-Chuan · 50, 114, 115
 JUVINYÀ Dolors · 25

K

KAGEYU Kanichi · 193
 KAKE Hisami · 128
 KALAITZAKI Stamatina · 13
 KALMANOVICH Dorit · 41
 KANG Chia-Ling · 159
 KANG Chia-Wen · 64
 KANG Hsiao-Yen · 134
 KAO Ching-Wen · 206
 KAO Chi-Wen · 13
 KAO Hsiu-O · 64
 KAO Lin-Li · 158
 KAO Mei Shih · 89
 KAO Senyeong · 86
 KAO Ting · 208
 KAO Tung-Wei · 13, 86, 87
 KAO Yi-Fong · 62
 KAPAGIANNIS Vasileios · 13
 KAVKOVA Blanka · 71
 KE Ya-Yon · 100
 KELLEHER Cecily C. · 21, 46
 KILLEEN Joan · 21
 KIM Byeong Gwan · 63
 KIM Do Yeon · 80
 KIM Hyekyeong · 9, 129, 225, 226
 KIM Hyungji · 228
 KIM Jiye · 129, 225, 226
 KIM Kue Sook · 59, 143, 187
 KIM Seok Yeon · 59, 187
 KIM Soo Kyoung · 9, 129, 225, 226
 KIM Yuri · 129
 KIMMEROVÁ Jana · 33
 KLAZINGA Niek · 5
 KNOTOFSKY Omri · 119
 KO Ya-Ling · 48
 KO Yi-Tsen · 15, 37, 102
 KOALICK Susann · 47

KOBAYASI Ai · 193
 KOELLDORFER Benjamin · 22, 49
 KOGURE Satomi · 87
 KOMINE Masako · 173
 KONISHI Tuyako · 161
 KOSLITSCH-NAGELER Verena · 38
 KRISTENSON Margareta · 5, 18, 24
 KRUSHINSKY Zoharit · 41
 KU Hui-Hsuan · 132
 KU Yung-Li · 201
 KUBEŠOVÁ Hana · 35
 KUMAKURA Masaki · 232
 KUMON Kazunori · 193
 KUNG Hsiang-Wen · 90
 KUNG Po-Jen · 16
 KUNG Su-Ying · 59, 60
 KUNG Wan-Chuan · 88
 KUNIGISKIENE Ramute · 56
 KUO Chia Yi · 140, 142
 KUO Chin-Ming · 107, 111
 KUO Hsin Yi · 168
 KUO Hung-Yao · 8
 KUO Jie-Shin · 165
 KUO Li-Chi · 62
 KUO Nai-Yu · 188
 KUO Weiwei · 172
 KUO Yi-Chun · 184, 233
 KUO Ying-Ling · 53
 KURAT Claudia · 47
 KUSUKAMI Yu · 193

L

LA DIEGA Amedeo · 31, 40
 LACKINGER Christian · 30
 LADNER Joel · 29, 43
 LAI Cheng-Chien · 141
 LAI Chia-Wen · 106, 147
 LAI Chien Hsiao · 153
 LAI Chih-Cheng · 76
 LAI Chi-Hsiu · 167
 LAI Chin Lien · 22, 189
 LAI Chin-Ping · 81
 LAI Fang-Tsu · 94
 LAI I-Rue · 54
 LAI Li-Na · 77
 LAI Shih-Chun · 175
 LAI Shih-Ting · 174
 LAI Yeur-Hur · 139
 LAI Ying Juan · 100
 LAN Cheng Hsien · 236
 LAN Shou-Jen · 58
 LANGELAND IVERSEN Mette · 32
 LARDIERI Gerardina · 31, 40, 45
 LARSSON Annika · 24
 LASSET Christine · 27
 LASSOLA Sergio · 44
 LAY Huey-Jen · 84, 86, 137, 179, 188

- LEE A Ram · 80
 LEE Ai-Ting · 224
 LEE Bih-O · 90
 LEE Chiachi · 70
 LEE Chia-Fang · 66, 82
 LEE Chia-Jung · 205
 LEE Chia-Yin · 159
 LEE Chia-Ying · 203
 LEE Ching Tzu · 163
 LEE Ching-Fang · 174
 LEE Chin-Ying · 134
 LEE Chun-Chuan · 152
 LEE Chun-Ying · 182
 LEE Fang-Hsin · 147
 LEE Hsien-Ju · 136, 177
 LEE Hui-Lan · 182
 LEE Hung-Chun · 54
 LEE Jae Hyup · 63
 LEE Jaekyung · 19, 63
 LEE Jee-Young · 63
 LEE Ji Hong · 59, 79, 135, 143, 148, 149, 187
 LEE Jin Yong · 63
 LEE Jiyoung · 225
 LEE Jungmin · 26
 LEE Kang-Wei · 224
 LEE King-Teh · 102
 LEE Li Yun · 149
 LEE Li-Chun · 81
 LEE Li-Chung · 173
 LEE Lu-Shan · 194
 LEE Mei-Hung · 206
 LEE Meng-Hsun · 67
 LEE Meng-Szu · 9, 21, 60
 LEE Min-Chun · 173
 LEE Ming-Tsung · 69, 70
 LEE Min-Yen · 220
 LEE Pei-Hsuan · 182
 LEE Pei-Ning · 76, 98, 99
 LEE Ru-Ping · 37
 LEE Seunga · 228
 LEE Shih-Kai · 64
 LEE Shu-Chen · 84, 86, 137, 216
 LEE Su · 163
 LEE Wan-Ling · 114
 LEE Wei · 68
 LEE Yen Heng · 84
 LEE Yi-Chen · 204
 LEE Yu Jeong · 59, 79, 143, 187
 LEE Yun-Hsiang · 139
 LEE Yun-Yi · 98
 LEUNG S F · 153
 LEVIN-ZAMIR Diane · 24, 43
 LEVY Michal · 67
 LI Cheng-Hsien · 190
 LI Chia-Ling · 71, 163
 LI Fang-Yi · 167
 LI Feng-Chen · 79
 LI I-Hsun · 106
 LI I-Ling · 64
 LI In-Fun · 90, 191
 LI Jhih-Ning · 110
 LI Ling-May · 36, 56, 59, 66, 75, 76, 85, 91, 94, 95, 96, 97, 98, 99, 131, 132, 150, 155, 177, 198, 204, 218, 234
 LI Ling-Mei · 105
 LI Mei-Fang · 74, 121
 LI Min-Hui · 163, 223, 234
 LI Pei-Chia · 104
 LI Pei-Shan · 111, 159, 202
 LI Ping-I · 214
 LI Shan-Ru · 86
 LI Siao-Ci · 74, 121
 LI Sing-Huei · 121
 LI Tsuei-Ping · 188
 LI Tsung-Han · 235
 LI Ying-Ru · 52
 LI Yu-Ching · 106, 147
 LI Yueh-Hua · 69, 70
 LI Yu-Jie · 10, 11, 53
 LI Yu-Meng · 104
 LIANG Cheng-Loong · 233
 LIANG Kang-Sheng · 159
 LIANG Li Fang · 102
 LIANG Li-Jen · 216
 LIANG Shioh-Ching · 68, 86, 122
 LIANG Shu-Chien · 234
 LIANG Ssu-Chia · 160
 LIANG Wei-Li · 146
 LIAO Chieh-Wen · 212, 236
 LIAO Hsiu-Mei · 219
 LIAO Lin Yu · 145, 175, 216
 LIAO Ling-Ling · 135, 195
 LIAO Man-Ling · 114, 115
 LIAO Pei-Hung · 57
 LIAO Wan-Yu · 193, 202
 LIAO Wen-Tsz · 8
 LIAO Yi-Tang · 150
 LIAW Fang-Yih · 87
 LIAW Lih-Jiun · 62
 LIEN Kai-Hung · 75, 204
 LIEN Tsung-Jung · 224
 LIN Chang-Sheng · 116
 LIN Chen-Ju · 174
 LIN Chia-Chen · 8, 29, 133
 LIN Chia-Hua · 124, 125
 LIN Chiao-Chuan · 140
 LIN Chiao-Yu · 122
 LIN Chien-Hung · 150
 LIN Chih-Yi · 105
 LIN Chih-Yu · 81, 229
 LIN Chi-Lind · 187, 232
 LIN Chin-Feng · 56, 98
 LIN Ching-Feng · 36, 59, 66, 75, 76, 85, 91, 94, 95, 96, 97, 98, 99, 105, 131, 132, 150, 155, 177, 198, 204, 218, 234
 LIN Ching-Yu · 132, 186
 LIN Chiu-Tzu · 61
 LIN Chun-Yu · 68, 83, 86, 122, 127, 138, 157, 213
 LIN Ciao Han · 100

- LIN Ciao-Ting · 175, 183
 LIN Ciou-Ping · 120
 LIN Dai Chan · 179
 LIN Fang-Ru · 49
 LIN Feng-Lien · 59, 60
 LIN Gan Fang · 100
 LIN Hsin-Chen · 79
 LIN Hui-Fan · 88
 LIN Hui-Lan · 97, 155
 LIN Hui-Min · 170
 LIN Hung-Ru · 176
 LIN I-Chen · 99
 LIN Jia-Mei · 209
 LIN Jin-Ding · 8, 29
 LIN Jing-Meei · 105
 LIN Jing-Yi · 148, 226
 LIN Jui-Ying · 152
 LIN Kai-Mei · 176
 LIN Kuan Hung · 89
 LIN Kuan-Yu · 95
 LIN Lan-Ping · 29
 LIN Li-Hung · 137
 LIN Li-Long · 102
 LIN Li-Lung · 37
 LIN Mei-Ling · 110
 LIN Mei-Ru · 160
 LIN Ming-Nan · 17, 38, 181
 LIN Pei Ying · 52
 LIN Qiu-Ling · 121
 LIN Sheng-Yu · 18
 LIN Shu-Chi · 128
 LIN Shu-Hui · 101
 LIN Shu-Ling · 63, 92, 116
 LIN Sin Yi · 137
 LIN Tseng Yu · 224
 LIN Tsunen · 133
 LIN Tzu-Chun · 52
 LIN Wei-Chung · 217
 LIN Wen-Jye · 97
 LIN Wu-Hsuan · 234
 LIN Ya Hui · 145
 LIN Ya-Xuan · 235
 LIN Yea-Pyng · 133
 LIN Yi-Fen · 230
 LIN Yi-Jhen · 202
 LIN Ying Siou · 9
 LIN Yi-Shiuan · 219
 LIN Yi-Yen · 14
 LIN Yuan-Chen · 195
 LIN Yuan-Wei · 92, 213
 LIN Yu-Ching · 151
 LIN Yueh-E · 61
 LIN Yu-Hsien · 138, 142
 LIN Yu-Hsuan · 166, 201
 LIN Yu-Hui · 127
 LIN Yun-Pei · 28
 LIN Yu-Pei · 122
 LIN Yu-Ting · 91
 LING Yuen-Yuen · 165
 LIOU I-Hsiu · 83
 LIOU Huoy-In · 134, 198
 LIOU I-Hsiu · 163, 223, 234
 LIOU Wen-Chin · 85, 135, 195
 LIU Chien-Wei · 53
 LIU Chu-Chun · 14
 LIU Chun-Sheng · 97
 LIU Hsiao-Ying · 235
 LIU Hsiu-Chin · 51
 LIU Hsiu-Chu · 56
 LIU Hsiu-Mei · 167
 LIU Hsiu-Yun · 52, 54
 LIU Hui Hu · 86
 LIU Hui Yueh · 227
 LIU Hui-Ling · 81, 82, 102, 173
 LIU J · 15
 LIU Ling Ling · 227
 LIU Meiling · 91
 LIU Ming-Jou · 135, 195
 LIU Tsung-Wen · 154
 LIU Wei-Shu · 219
 LIU Ya-Min · 69, 70
 LIU Yen-Tze · 119
 LIU Yun Chen · 89
 LIU Yu-Ying · 164, 165
 LIVSCHITZ-RIVEN Ilana · 20
 LO Chia-Lin · 120
 LO Chia-Lun · 71
 LO Ching-Chu · 150
 LO Li-Ly · 108
 LO Yu-Tai · 68, 179
 LOPEZ-DICASTILLO Olga · 42
 LOU Meei Fang · 9
 LU Chia-Yen · 80
 LU Feng-Hwa · 68
 LU Feng-Ping · 185
 LU Hsin-Yin · 151
 LU Huei-Lan · 111, 120, 143, 144, 159, 178, 183, 190,
 199, 202, 205, 206, 208, 209, 210, 215, 216
 LU Mei-Jou · 200
 LU Nai-En · 186
 LU XQ · 15
 LU Yu Chu · 152
 LU Zi-Yin · 73
 LUHTA Reetta-Maija · 47
 LUO Chyuan Luo · 98
 LUO Jiing-Chyuan · 36, 56, 59, 66, 75, 76, 85, 91, 94, 95,
 96, 97, 98, 99, 105, 131, 132, 150, 155, 177, 198, 204,
 218, 234
 LUO-LAI Wen Yu · 133
 LYONS Ailsa · 21, 46
-
- M**
 MA Cheng-Yea · 207
 MA YX · 15
 MACHIDA Hanako · 192
 MAEDA Motoya · 191, 193

MAGNONI Sandra · 44
 MAGNUSSON Maria · 25, 36
 MANGILI Silvia · 23
 MAR Guang-Yuan · 11
 MARIANI Sara · 162
 MATHIS-EDENHOFER Stefan · 45
 MATSUMOTO Hiroaki · 161
 MATSUMURA Naomi · 128
 MATSUMURA Norihiro · 232
 MATTSON Ana · 46
 MEODED ARAKI Maayan · 67
 METZLER Birgit · 22, 32, 49
 MINEN Donatella · 31
 MINORIKAWA Shiho · 87
 MIORI Sara · 44
 MISHIMA Nobuyuki · 193
 MITOLA Barbara · 44
 MOLASSIOTIS A · 15
 MORASSUTTO Caterina · 45
 MORIBE Humiko · 193
 MORIKAWA Nariaki · 193
 MOTEGI Hiromi · 87
 MUGAMI Odelia · 67
 MUJIKA Agurtzane · 42

N

NAGLIATI Carlo · 40
 NAKAI Haruna · 193
 NAKAMURA Tamae · 191, 193
 NARITA Kazuyuki · 193
 NEGISHI Kyota · 161
 NG P L · 153
 NI EIDHIN Gráinne · 46
 NICCA Dunja · 38
 NIKOLINAKOS Panayiotis · 13
 NOAH LEVIN Ifat · 67
 NOEHAMMER Elisabeth · 34
 NORDSTRÖM Anna · 28
 NOWAK Peter · 24, 25, 32

O

OHLSSON Marie · 28
 OKUZONO Yusuke · 193
 ONISHI Akiko · 193
 ONODERA Yumiko · 87
 ORLEV Dario · 119
 OSAKI Mayumi · 192
 OSTARDO Edoardo · 40
 OU Hsiao-Tei · 173
 OUYANG Chung-Mei · 224
 OZEKI Ayako · 192

P

PAGKATIPUNAN Paulo Maria · 35
 PAI Tzu-Chen · 136, 177
 PAN Hsiang-Ju · 136
 PAN Hsiu-Fang · 100, 208
 PAN Li-Fei · 108
 PAN Yu-Ling · 13
 PAN Zai-Rong · 121
 PANG Q · 15
 PARK Minhyun · 63
 PASCUTTINI Elide · 31
 PASTORE Elisa · 96, 155
 PELIKAN Jürgen · 24
 PENG Chun-Hui · 177
 PENG Hsiao-Yun · 106
 PENG Jung En · 227
 PENG Tao-Chun · 87
 PÉREZ Anna Carol · 25
 PERINO Annamaria · 44
 PESCE Luisa · 61
 PEZZELLA Marianna · 162
 PIEMONTESE Annamaria · 45
 PÖLÖNEN Auli · 32
 PORTOLAN Patrizia · 31, 40, 45
 PROKEŠOVÁ Radka · 35
 PUJIÜLA Jordi · 25
 PUMAR-MENDEZ Maria Jesus · 42

R

RE Federico · 162
 RENN Jenn-Huei · 108
 RIDEL Catia · 29
 RITMAN Stephanie · 79
 RIUS OTTENHEIM Nathaly · 61
 ROESSLER Maggie · 42
 ROH Young Soo · 80
 ROJATZ Daniela · 25, 38
 ROSS Edgar · 143, 149
 ROSSI Lina · 162
 ROZENBERG Margaux · 27
 RUSSIAN Stefano · 31, 40
 RYU Heui Geun · 59, 187

S

SAKAKI Yoshiko · 87
 SAKURAI Eri · 87
 SANDSTROM Patrick · 47
 SANNA Andrea · 44
 SANTIÑÁ Manel · 25
 SAWADA Naoki · 193
 SBERNINI Luca · 162
 SCARPINI Gian Carlo · 96, 155
 SCARPIS Enrico · 40
 SCHMIDT Andrea · 45

SCHMITT Isabella · 34
 SCHNEIDER Peter · 45
 SCHREYER Julia · 34
 SEEBACHER Simone · 42
 SELLERI Isabella · 31
 SEOL Dongwon · 63
 SHA K Y · 153
 SHEN Shan Yu · 179
 SHEN Wei-Hong · 10
 SHEN Wen-Chun · 66
 SHEN Yu-Hua · 100
 SHEN Yun-Ju · 112, 115
 SHIEH Po-Chuen · 84
 SHIH Ai-Wei · 116
 SHIH Cheng-En · 121
 SHIH Ching-Lin · 188
 SHIH Hsiang-Shun · 233
 SHIH Shu-Ling · 196
 SHIH Wei-Chu · 191
 SHIH Whei-Mei · 224
 SHIMA Kyoko · 193
 SHIU Pei-Yuan · 166
 SHIU Shiau-Fen · 174
 SHU Mei-Lan · 95
 SIAO Fei Siou · 74
 SIE Ning-Huei · 12, 38
 SIE Yi-Sin · 81
 SILJAMÄKI-OJANSUU Ulla · 32
 SILUK Yael · 67
 SIM T C · 153
 SIMÓN Rosa · 25
 SIMONELLI Ilaria · 61
 SOBUE Hanako · 192
 SONG Kyoungjun · 63
 SONG Xiao Rui · 194
 STAWASZ Mariola · 41
 STEIN K. Viktoria · 30
 STEJSKALOVÁ Veronika · 71
 STRASSMAYR Christa · 24
 STÜRMER Natascha · 38
 STYNES Sinéad · 46
 SU Antony · 212
 SU Bao-Yuan · 236
 SU Chen-Ying · 84
 SU Chia-Huei · 152
 SU Chia-Yu · 168
 SU Chi-Chun · 159
 SU Chih-Sheng · 57
 SU Ching-Chuen · 186
 SU Ching-Chun · 202
 SU Hsi-Hsun · 84, 179
 SU Jingyi · 133
 SU Pei-Chen · 152
 SU Pei-Fang · 171, 236
 SU Pei-Hong · 152
 SU Ya-Ling · 143
 SU Yi-Jing · 127
 SUN Hsu-Yuan · 219
 SUN Shu-Fen · 163, 223, 234

SUN Tianzhi · 23
 SVIDENSKÁ Tereza · 33
 SYU Wan-Yu · 110
 SYU Yi-Jhen · 113
 SYU Yu-Fong · 122

T

TAI Jui-Fen · 73
 TAI Wei-Ting · 13
 TAKAGI Aoi · 193
 TANG En-Kuei · 28
 TANG James, Tao-Qian · 233
 TANG Jing-Shia · 147
 TANG Nein-Jung · 11
 TANG Pei-Ling · 72, 146
 TANG Rui-Yi · 231
 TANG W K · 153
 TANG Yi-Chin · 189
 TARBAL Arian · 25
 TARDY Juliette · 27
 TASI Shu-Fen · 120, 210
 TASI Yu-Chun · 206
 TERADA Ayaka · 193
 TERAOKA Kaori · 161
 TIAN Hui-Yi · 224
 TIEN Wan-Jung · 165
 TING Hsiao-Chen · 160
 TING Shih-Tan · 54
 TIOMIN Inessa · 20
 TOKUNAGA Satoshi · 161
 TOMIYAMA Momoko · 232
 TONUTTI Giuseppe · 45
 TÓTHOVÁ Valérie · 35
 TRENTALANGE Anna Giovanna · 44
 TREŠLOVÁ Marie · 33
 TSAI Chia-Jung · 195
 TSAI Chia-Lin · 78
 TSAI Chien-Tsung · 186
 TSAI Ching-Yen · 57
 TSAI Chiung Man · 216
 TSAI Chiung-Yao · 135, 195
 TSAI Chun-Chi · 105
 TSAI Hin-Chu · 177
 TSAI Hsiao-Jung · 128
 TSAI Hsin-Yu · 111
 TSAI Hsiu-Ju · 77
 TSAI Hui-Chu · 134
 TSAI Hui-Ling · 64
 TSAI Hung-Wen · 67
 TSAI Jui-Fen · 12
 TSAI Liang-Miin · 171, 236
 TSAI Li-Hui · 156
 TSAI Li-Li · 109, 211
 TSAI Meng-Hsiu · 181
 TSAI Ming-Chi · 156
 TSAI Ming-Hui · 230
 TSAI Pei-Chen · 69, 70, 132

TSAI Pei-Jung · 53
 TSAI Ru-Ying · 225
 TSAI Sheng-Hua · 85
 TSAI Shih-Chung · 92
 TSAI Wan Yi · 117
 TSAI Wei-Chi · 102, 105
 TSAI Wen-Ling · 134, 198
 TSAI Ya-Lun · 174
 TSAI Ya-Ping · 209
 TSAI Yi Shan · 102
 TSAI Yi-Fan · 101, 103, 110, 111, 113, 122, 160, 184, 235
 TSAI Yi-Ting · 130, 131
 TSAI Yu-Chun · 143, 144
 TSAI Yu-Hsuan · 108
 TSAI, Yi-Fan · 165
 TSAN Chin-Yuan · 99
 TSANG W Y · 153
 TSAO Wen-Long · 12
 TSAO Yu-Chieh · 157
 TSENG
 Sened · 61
 TSENG Cheng-Chun · 71
 TSENG Chi · 130, 221
 TSENG Chia-Lin · 54
 TSENG Chiao-Chun · 134
 TSENG Chih-Ting · 109
 TSENG Hsiao-Ching · 194
 TSENG Hui-Ling · 107, 111
 TSENG Mei-Ting · 71
 TSENG Meng-Chuan · 81, 82, 102, 170, 173, 219
 TSENG Min-Hua · 104
 TSENG Shih Cheng · 224
 TSENG Shu-Ching · 231
 TSENG Su-Mei · 16
 TSENG Tzu-Wei · 100, 208
 TSENG Yuan-Tsung · 138, 139, 140, 142, 143, 172, 173, 215
 TSENG Yueh-Pei · 198
 TSENG Yu-Han · 188
 TSENG Yu-Kuei · 206
 TSIA Wen Huey · 236
 TSOU Chien Jou · 89
 TSOU Meng-Ting · 185
 TSUJIGUCHI Shinichi · 193
 TSUMORI Miho · 128
 TU Chi-Chao · 76, 98, 99
 TU Po Huai · 137
 TU Yu-Lin · 199, 200
 TUAN Sheng-Hui · 163, 223, 234
 TUNG Yu-Hua · 170
 TZENG Ya-Mei · 86
 TZOU Rung-Huei · 205

U

UMBRELLO Michele · 44

V

VALDERAS Jose · 6
 VALENTINI Mariagrazia · 31
 VANDER Tatiana · 67
 VARVARESOS Stefanos · 13
 VASANKARI Tuula · 47
 VICENTE Mireia · 25
 VIKBERG Sanna · 28
 VILLANUEVA Natividad · 35

W

WALSH Caroline · 21, 46
 WANG
 Hsuan-Min · 117
 WANG Bomin · 163
 WANG Chang-Ru · 167
 WANG Chao-Min · 132
 WANG Chen-Wei · 182, 220
 WANG Chi · 137
 WANG Chia-Chi · 54
 WANG Chia-Fen · 151
 WANG Chih-Ying · 185
 WANG Ching Ying · 203
 WANG Chun-Hsiang · 139
 WANG Hsiang-Ping · 118
 WANG Hsiao-Chu · 12
 WANG Jia-Kang · 52, 233
 WANG Jia-Ning · 184
 WANG Jiun-Yi · 58
 WANG Jyn-Yeong · 98
 WANG Kuan-Yuan · 178
 WANG Li Chuan · 179
 WANG Ling-Hsiang · 69
 WANG Lu-Kai · 58
 WANG Mei Shu · 194
 WANG Mei-Hsiu · 70
 WANG Mei-Hua · 199
 WANG Shao-Cheng · 178
 WANG Shere-Er · 91
 WANG Shi Han · 102
 WANG Shu-Chen · 174, 236
 WANG Shu-Chiu · 171, 236
 WANG Shu-Mei · 151
 WANG Su-Ning · 76
 WANG Wan-Ting · 138
 WANG Wei-Chen · 205
 WANG Wen-Yao · 76
 WANG Ya-Hui · 190, 198
 WANG Ying-Fang · 127
 WANG Ying-Wei · 70, 179
 WANG Yi-Ting · 82
 WANG Yu-Hung · 198, 218
 WEI Fang-Chun · 221
 WEI Hsiao-Hen · 113
 WEI Hsiu-Fun · 193
 WEI Shu-Ping · 77

WEI Shu-Yi · 136, 177
 WEI Syu-Jhen · 101
 WEI Yi-Lun · 100
 WEIGL Matthias · 34
 WEN Shang-Yu · 57, 130
 WENG Pei-Hsuan · 120, 130
 WIESINGER Thomas · 30
 WOLF Axel · 40
 WON Jebin · 228
 WONG Bao-Mei · 81
 WONG C L · 153
 WONG Ruey-Hong · 221
 WONG Sheng-Kai · 126
 WONG Su-Wei · 165
 WONG WCW · 15
 WU Bao-Tzung · 118
 WU Chao-Chun · 8, 17, 181, 182
 WU Chia-Jung · 95
 WU Chieh-Shan · 108
 WU Chien-Yuan · 8, 179, 181, 182
 WU Chin Wen · 82
 WU Chi-Wen · 97, 150
 WU Chun-Kuei · 99
 WU Fu-Zong · 11, 28
 WU Hsien-Lin · 139
 WU Hsin-Ju · 74
 WU Jia-Min · 14, 20
 WU Ju-Fang · 84
 WU Jun-Long · 95
 WU Jun-Ting · 52
 WU Mei-Chuan · 77, 100, 208
 WU Meng Syun · 109
 WU Meng-Hsuan · 157
 WU Meng-Ting · 76, 98, 99
 WU Ming-Chun · 77
 WU Ming-Ting · 11, 28
 WU Ming-Tsang · 9, 21
 WU Pei Shan · 116
 WU Pei-Chun · 182
 WU Pei-Shuang · 192, 197
 WU Pi-Keng · 132, 234
 WU Pi-Kent · 218
 WU Shu-Huei · 136
 WU Shu-Hui · 108
 WU ShWen · 120
 WU Siou-Fang · 134, 198
 WU Tai-Lian · 95
 WU Te-Fang · 72
 WU Tsai-Chin · 199, 200
 WU Tung-Huan · 76, 98, 99
 WU Wan-Tzu · 219
 WU Wei-Hsin · 75, 204
 WU Wen Chuan · 212
 WU Wen-Cheng · 111, 120, 159, 183, 202, 205, 206, 209, 210, 215, 216
 WU Wen-Chun · 194
 WU Win-Cheng · 205
 WU Yi-Chen · 197
 WU Yi-Jing · 164

WU Yun-Ju · 11, 28

X

XIAO Yu-Wen · 136
 XIE Jia Ying · 52
 XU Hongyi · 221

Y

YAMAMOTO Shigeki · 232
 YAMAUCHI Yoshio · 87
 YAN Jyun Huei · 155, 228
 YAN Ting-Ju · 195, 196
 YANG
 Yi-Ching · 68
 YANG Bey-Jing · 93, 114
 YANG Chia-Lin · 223
 YANG Chih-Kai · 85
 YANG Chin-Chu · 77
 YANG Ching-Yu · 235
 YANG Fu-Ling · 48
 YANG Fu-Ying · 105
 YANG Hao-Yu · 112, 115
 YANG Hsinju · 190, 198
 YANG Hsin-Mei · 198
 YANG Hui Fei · 182
 YANG Jhen-Hua · 152
 YANG Li Ming · 194
 YANG Li-Ling · 126
 YANG Li-Min · 109, 211
 YANG Meei-Horng · 176
 YANG Nein-Jung · 10
 YANG Pei-Ru · 20
 YANG Shan-Shan · 223
 YANG Sheng-Yu · 92
 YANG Shih-Chen · 176, 180
 YANG Shu-Chen · 89
 YANG Shu-Chi · 111
 YANG Shu-Han · 110
 YANG Tsung-Lung · 114, 115
 YANG Tsung-Yen · 96
 YANG Wen Jiu · 52
 YANG Wen-Chen · 193, 202
 YANG Ya-Chi · 99, 113
 YANG Ya-Ting · 103
 YANG Yi-Chun · 118
 YANG Yuh-Ying · 107, 111
 YANG Yu-Ru · 127
 YANG Yu-Wen · 57
 YAO Chiung-Fang · 105
 YAO Pei-Hua · 109
 YAO Wen-Chen · 177, 198, 218, 234
 YAO Wenzhen · 91
 YAU Wen-Jen · 96
 YE Yu-Shi · 8, 20
 YEH Chu-Chuan · 62

YEH Feng-Chen · 62
YEH Hsin Han · 155, 228
YEH Jih-Kuei · 180, 185
YEH Ju Yen · 169
YEH Shing-Chih · 229
YEH Shu Ting · 147
YEH Shu-Chuan Jennifer · 50
YEH Shu-Ling · 16
YEN Chia-Chi · 68, 83, 86, 108, 122, 123, 127, 136, 138,
157, 177, 187, 213, 217
YEN Cuacheng · 48
YEN Yahui · 37
YEN Yu-Ting · 178, 190, 222
YIN Ming-Fang · 52
YING Ming-Fang · 65
YOKOYAMA Sachiko · 161
YOSHINO Hajime · 87
YOU Ting-Chi · 134
YU Ching-Lan · 137
YU CMW · 15

YU Hsin-Ting · 57, 130
YU Sheng-Tsung · 201
YU Tsai Mei · 149
YU Tzu-Ying · 116
YU Yu-Lin · 230
YUKI Yoshie · 191, 193

Z

ZAMMIT Agnese · 162
ZHAO Ivy Y · 15
ZHENG Wei-Ting · 157
ZHONG Rui-Ying · 26
ZHOU Yi-Ling · 130
ZHUANG Fu-Ann · 207
ZINGMARK Magnus · 28
ZINI Mira · 20
ZORATTI Raffaele · 31