

出國報告（出國類別：其他）

## 參加護理國際研討會—第 28 屆健康 促進醫院國際研討會視訊報告

服務機關：國立陽明交通大學附設醫院

姓名職稱：賴琦琇護理長、張丞洵副主任

派赴國家：法國巴黎(視訊會議)

出國期間：110.10.12

報告日期：110.10.27

## 摘要

國際健康促進醫院和健康服務網絡(HPH)自 1995 年由歐洲全國性及區域性健康促進醫院網絡建立，WHO-HPH 國際網絡著手將「WHO 臨床健康促進計畫」引導入醫院品質的管理中，HPH 進階計畫則是以醫療照護的病人為中心，將健康促進理念導入傳統臨床路徑，最終評估治療結果及病人安全改善。

2021 年第 28 屆健康促進醫院國際研討會主題為「發展以健康為導向之健康照護管理體系」，由法國健康促進醫院網絡的國家協調單位 RESPADD 主辦，因 COVID-19 疫情影響，會議採網絡平台方式進行，會議以數位化，讓每個人都能參加，將實施所有資訊相關作為，以便進行互動交流，徵稿主題分為 23 大類，會議期間將舉行兩次全體會議、口報論文發表共 21 篇、迷你論文口頭發表 5 篇和超過 380 篇的海報論文發表，在平行會議和海報會議中，就相關主題列表進行發表和討論。

關鍵字：

健康促進醫院國際研討會

## 目次

壹、目的.....	第 1-2 頁
貳、過程.....	第 2-6 頁
參、心得.....	第 6-8 頁
肆、建議事項.....	第 8-9 頁
伍、附錄.....	第 10-19 頁

## 壹、 目的

歐洲全國性及區域性健康促進醫院網絡自 1995 年建立，WHO-HPH 國際網絡著手將「WHO 臨床健康促進計畫」引導入醫院品質的管理中，HPH 進階計畫則是以醫療照護的病人為中心，將健康促進理念導入傳統臨床路徑，最終評估治療結果及病人安全改善。第 28 屆健康促進醫院與照護機構國際研討會大會主題：發展以健康為導向之健康照護管理體系(Development of health-oriented health care management systems)徵稿類別多元，包括：Health care management systems, structures and processes to optimize health gain for patients, staff and populations served (健康照護管理體系、架構及流程以優化接受服務之病人、員工及群眾之健康收益)、Governance models, culture, policy and leadership for HPH (健康促進醫院與照護機構之治理模式、文化、政策與領導)、Health workforce practice and training (健康職場實務與訓練)、Accessibility of services (服務可近性)、Health literate health care organizations (具健康識能之健康照護機構)、Digitalization in health care and health promotion (健康照護與健康促進之數位化)、Monitoring, implementation and evaluation (品質監測、執行與評價)、Patient and provider communication and patient empowerment(病患和服務提供者溝通與病人增能賦權)、Supporting patient behavior change and healthy lifestyles (支持病人行為改變及健康生活型態)、Food, nutrition and diet (食物、營養及飲食)、Physical activity (身體活動)、Tobacco prevention (菸害防制)、

Addictive behaviors (成癮行為)、Prevention of NCDs and chronic disease management (非傳染性疾病之預防與慢性病管理)、Health promotion responses to the COVID-19 pandemic (健康促進如何因應 COVID-19 大流行)、Child, adolescent and maternal health (兒童、青少年與婦女健康)、Age-friendly health care (高齡友善健康照護)、Migration, equity and diversity in health care and health promotion (健康照護與健康促進之移民、平等和多樣性)、Healthy workplace (健康職場)、Mental health (心理健康)、Identifying and addressing health needs in the society (識別和解決社會中的健康需求)、Environmental sustainability, climate change and health (環境永續、氣候變遷與健康)、Sharing information, research and capacity (分享訊息、研究和能力) 會期共 1 天。臺灣參與世界衛生組織(WHO)相關學術團體中，最舉足輕重的學會，莫過於國際健康促進醫院學會(HPH)。臺灣是該學會國際上最大的網絡(臺灣共有超過 160 家國際網絡會員)，歷年來參加國際研討會的人數及論文篇數都主導整個大會，這樣的成果促使大家會努力繼續維持參與度。

## 貳、過程

2021年10月12日於法國巴黎(線上會議)舉辦的健康促進醫院國際研討會於當地時間08:00正式開幕，大約臺灣時間下午1:30開始，內容簡要如下：

一、全體會議1：健康導向管理層提供保健服務系統 - 是什麼以及為什麼？

克里斯汀森·瑪格麗塔以一個衛生系統經濟合作暨發展

組織的觀點，談及健康促進醫院網絡和衛生服務(HPH)的成立是為了支持重新定位衛生服務，目的是要更好地應對社會中的健康需求服務並有助於追求衛生內容，描述治理模式在健康導向和平衡健康結果、倫理和經濟方面的影響。

### Plenary 1: Health-orientation of health services by Management systems – What and why?



## 二、全體會議 2: 管理系統對醫療保健服務的健康導向如何？

### - 良好做法的模型和標準

世界各地的決策者面臨著一系列共同的問題，在考慮改善醫療保健的方案時遇到的問題表現。在過去的幾十年裡，努力直接優化醫療保健服務的質量和安全，重點是關於提供循證護理和實施一系列獎勵機制性能基於對最佳證據的堅持。一種現在正在發生根本性的轉變，重點明確被放在護理的結果上，而不是過程從而實現這些結果。這種基於價值的健康護理方法特別重視這些結果對患者最重要並使患者報告對價值衡量至關重要的結果和經驗。至關重要的是，它可以幫助

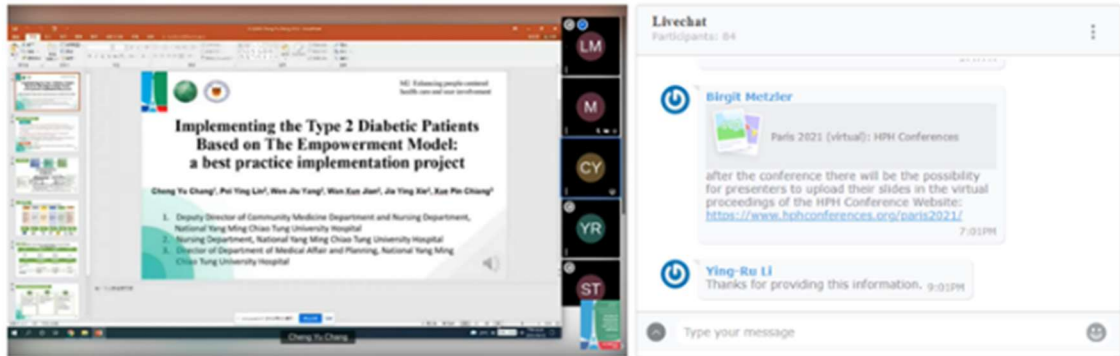
重新定位醫療保健滿足患有多種疾病的人的需求條件。在本次主題演講中，Valderas 教授概述基於價值的醫療保健的原則，關於患者報告結果的信息，對醫療保健提供影響的證據，依據衛生保健提供的結果和最近的發展識別指標和相關國際經驗。

經過 2 場全體會議後，緊接者其中一個會場由院內社區醫學中心張丞洵副主任進行口報論文發表，主題為「Implementing the Type 2 Diabetic Patients Based on The Empowerment Model: a best practice implementation project」、另個人以「Association between Utilization of Emergency Psychiatric Medical Services and Suicide among Adolescents in Taiwan」亦獲選海報論文發表的機會，兩者論文摘要皆收錄在 28th International Conference on Health Promoting Hospitals and Health Services abstract book 中。



圖一、張丞洵副主任進行口報論文發表，主題為「Implementing the Type 2 Diabetic Patients Based on The Empowerment Model: a best practice implementation project」(110.10.12)

S2.0 -Enhancing people-centered health care and user involvement



Venue :

Telemedicine program improves medical environment in remote area using 5G mobile communication in Northern Taiwan  
Tzu-chun Lin, Jun-Ting Wu, Jia-Kang Wang

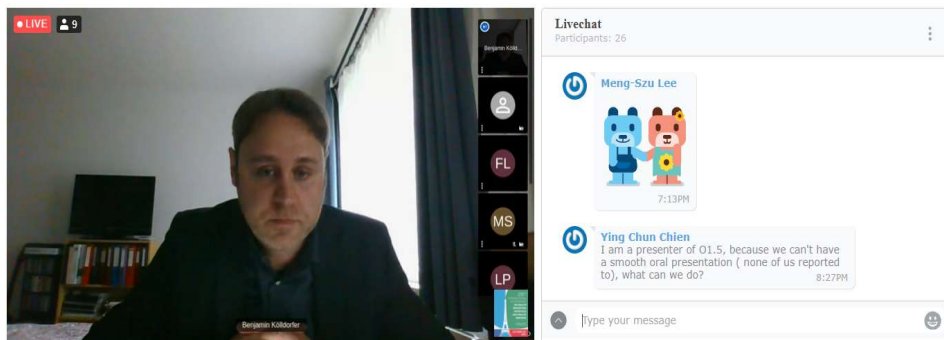
The Effect of Sharing Decision-making in Stroke Rehabilitation – The Preliminary Results  
Ying-Ru Li, Chia-Ying Hsieh, Ming-Fang Yin, Hui-Ya Chan, Hsiao-Yun Liu

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

圖二、張丞洵副主任口報論文主題為「Implementing the Type 2 Diabetic Patients Based on The Empowerment Model: a best practice implementation project」簡報畫面(110.10.12)



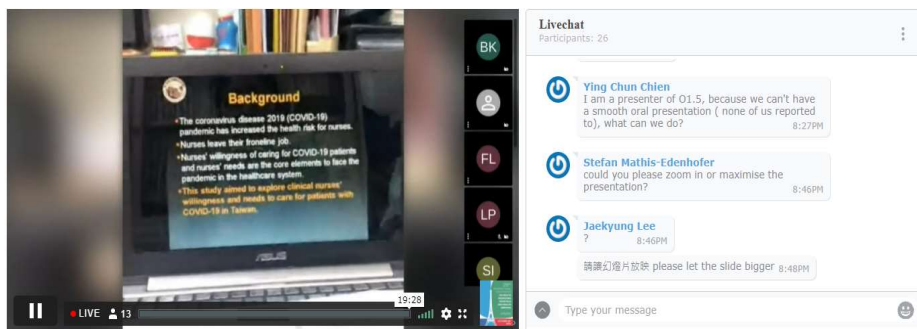
S4.0 Venue -Health promotion responses to the COVID-19 pandemic



圖三、其他與會者進行口報論文發表畫面(110.10.12)



S4.0 Venue -Health promotion responses to the COVID-19 pandemic



圖四、其他與會者進行口報論文發表畫面(110.10.12)

參、心得：

一、張丞洵副主任：

參與此次 2021 第 28 屆健康促進醫院國際研討會，在學術研究上的專業知識增長，也拓展個人對於健康促進在各國家推廣的視野，藉由參與這次研討會瞭解到國人的健康照護不應只著重於身體上的健康，個案的心理、社會的健康照護也相當重要。藉由這次研討會個人參加迷你口頭報告，場次為 M2.0 「Enhancing people-centered health care and user involvement」，報告主題 Implementing the Type 2 Diabetic Patients Based on The Empowerment Model: a best practice implementation project，也個人增加英文簡短口頭報告的經驗，雖然只有短短 5~6 分鐘，研討會當日恰巧視訊網路不穩，更是製造緊張氣氛，擔心影響英文簡短口頭報告，上場演說前先沉澱自己的心情，也讓我瞭解想作為一位專業的國際學術

研究人才，面臨任何場合都要沉穩應變，在英文的聽、說、讀、寫是必備的能力，尤其是對於我們較弱的「聽和說」，是需要加強；這次與會的人員皆來自不同地區的國家的人，口音差異相當顯著，如何讓自己的英文報告流暢且具備抑揚頓挫，未來尚需在這兩部分更加努力精進學習；參加研討會多位講者分享健康促進醫院推展經驗與研究，可瞭解到各國對於健康促進及環境友善所執行的面向，除了報告的演說技巧也相當重要外，還有報告前的投影片製作到實際上臺報告、主持人如何掌控會議時間，以及發問時要如何邏輯性地明確表達欲釐清的問題等，從本次的研討會著實學到不少相關的技巧，透過此次健康促進醫院與照護機構國際研討會收穫滿滿。

## 二、賴琦琇護理長：

回想過去參加護理國際研討會的經驗，現場聆聽其他專家或參與者分享自己的研究成果，看者他們自信的樣子和清晰的口條，總讓我欽佩不已。此次是我第一次參加健康促進醫院國際研討會，也是第一次參與線上國際研討會，雖然只是海報發表，但也讓我萬分期待，不同於現場舉辦的線上會議，將有甚麼不同的感受或能激盪出甚麼火花？但會議當天前除一頁式的會議議程外，未能事前收到相關會議信息或注意事項，實在令人無所適從。

當天僅第 1 場的全體會議能正常參與，無信息中斷或連線問題外，其餘場次偶出現連線中斷、訊號不穩定，之後甚至還中斷了會議的流程。會議後，收到主辦單位來信說明會議當天早上發生了來自 OVH（法國服務器）的服務器故障，並在全國（法國）持續了兩天，導致包括會議平台在內的 15,000

多個網站癱瘓，由於這個技術問題，支持視頻內容的平台被破壞了，才會導致會議當天不幸的事件。不過主辦單位也提供解決方案，將大多數沒有現場直播的會議錄製下來，提供我們在 15 天內可以自由上網觀看。

由於技術問題，主辦單位無法讓每個人都展示自己的論文文稿，因此也提供每位參與者 28th International Conference on Health Promoting Hospitals and Health Services abstract book，讓我們可以保存且事後參閱，此外也特別指出我們可以將自己的文稿上傳到國際會議秘書處的網站上。會議記錄將不斷更新 <https://www.hphconferences.org/paris2021/>。如果有口頭或小型口頭報告，也可以以 pdf 格式上傳到會議記錄中，以供更廣泛的受眾使用，進行更多的交流分享。

僅半天的國際研討會因地區時差影響，大約臺灣時間下午一點半開始，但因會議平台在內的 15,000 多個網站癱瘓導致會議中斷，又加上語言的隔閡，實際收穫實在有限，但能確認所謂的健康照護不應只著重於身體上的健康，包括心理、社會的健康照護也相當重要，甚至健康政策也是影響人類維持健康的重要因素之一。未來有空將慢慢審視大會所提供之論文摘要，以期了解健康促進醫院及健康照護機構最新的議題。

#### **肆、建議事項**

因疫情影響為現今社會留下了不可逆的改變，維持社交距離及非接觸的要求下遠距工作、教學已儼然成為一種新轉型的運作模式，如何運用視訊工具、虛擬會議室進行線上會議都是全球趨勢，但如何確保視訊過程順暢，並擁有整體視

訊互動效果，都是事前重要的準備工作，因唯有讓會議或教學過程順利進行，才能談及教學或會議成效。

身為國立大學附設醫院的我們正努力朝著醫學中心邁進，除了硬體設備的拓展和擁有卓越的醫療專業外，人才培育、學術研究的推動也是我們的使命，雖院內原有鼓勵同仁進行研究投稿與發表的機制，但應不局限職類別或個人職涯發展性質，以擴展視野、激發個人潛能並提升團體氛圍。另現今線上研討會盛行，舉辦方式和規模皆與實體研討會不同，如線上國際會議本無出國之實，怎需填報出國報告？建議研擬簡易且實際之核銷方式，以鼓勵同仁進行相關的研究與學術發表。

## 伍、附錄

附錄一:第 28 屆健康促進醫院國際研討會會議行程表

附錄二:發表摘要

附錄三:摘要審查結果通知單

附錄四:參與證明

附錄一:第 28 屆健康促進醫院國際研討會會議行程表

<b>TUESDAY, OCTOBER 12, 2021</b>	
07:45 - 07:55	Connexion
07:55 - 08:00	Pre-event virtual meetup and information, digital meet & greet
08:15 - 08:20	Conference opening
08:20 - 09:30	Plenary 1: Health-orientation of health services by Management systems – What and why?
09:30 - 09:40	Break
09:40 - 10:40	<b>(MINI) ORAL PARALLEL SESSIONS 1</b>
	S1.0-Structures and processes of health-oriented management systems
	S1.1-Symposium - Lessons from Pandemic: Re-orientation of Health Promoting Hospitals and Health Services-Healthy Hospital 2.0
	S1.2-Healthy workplace I
	S1.3-Prevention of NCDs and chronic disease management I
	S1.4- Health promotion strategies for dementia
10:40 - 10:45	Break
10:45 - 11:45	<b>(MINI) ORAL PARALLEL SESSIONS 2</b>
	S2.0-Enhancing people-centered health care and user involvement
	S2.1 -Symposium - HPH & Environment
	S2.2- Health care management systems, structures and processes to optimize health gain for patients, staff and populations served I
	S2.3-Health promotion responses to the COVID-19 pandemic I
11:45 - 11:50	Break
11:50 - 12:50	<b>(MINI) ORAL PARALLEL SESSIONS 3</b>
	S3.0-Supporting patient behavior change and healthy lifestyles
	S3.1 -Workshop - Health literate health care organizations
	S3.2-Health care management systems, structures and processes to optimize health gain for patients, staff and populations served II
	S3.3-Prevention of NCDs and chronic disease management II
12:50 - 13:00	Break

## 附錄二:發表摘要

28TH INTERNATIONAL CONFERENCE ON HEALTH PROMOTING HOSPITALS AND HEALTH SERVICES

SUBMISSION

Edit Abstract

If you experience any difficulties with this form, please contact us at

congress-secretariat@hphconferences.org

Presentation type \*

(E-)Poster Presentation

Abstract type \*

Research

Subject \*

Child, adolescent and maternal health

Optional secondary subject

Child, adolescent and maternal health

Abstract title \*

Association between Utilization of Emergency Psychiatric Medical Services and Suicide among Adolescents in Taiwan

List of authors \*

Lai,Chi-Hsiu Chang-Ru Wang

Presenting Author \*

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Background/Problem/Objective \*

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.

Methods/Intervention \*

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.

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Results (of evaluation) \*

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/Lessons learned \*

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

Relevance to HPH \*

Due to frequent student suicides in recent years and strongly continuous, therefore, one should investigate types of adolescent mental disorders so as to address their disease-related risk factors accordingly, arrange mental health education and psychiatric counseling services, enhancing suicide prevention through the development of effective institutional policies, strengthen the mental health and suicide prevention and control work of Taiwanese adolescents.

If this submission is a contribution to an organized Workshop/Symposium Insert title and organizer of the session

N/A

Keywords

Adolescents , Psychiatric Services, Emergency department

Comments

N/A



## HPH Abstract Submission

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### Abstract

Abstract Type: Mini Oral (Pitch) Presentations (presentation of 3-5 minutes)  
Abstract Title: Implementing the Type 2 Diabetic Patients Based on The Empowerment Model: a best practice implementation project  
Subject: Patient and provider communication and patient empowerment  
Sub-Subject: Patient and provider communication and patient empowerment  
Type: 0  
Authors: Cheng Yu Chang, Pei Ying Lin  
Background/Problem/Objective: 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.  
Methods/Intervention : 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



Results (of evaluation) :	<p>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.</p> <p>The mean score of self-efficacy was <math>36.5 \pm 12.1</math> and <math>37.6 \pm 13.2</math> for the experimental and control groups before intervention. The difference was not significant (<math>p=0.35</math>). Two months after the intervention, the mean of self-efficacy was <math>50.7 \pm 13.2</math> and <math>40.2 \pm 16.5</math> for experimental and control groups, respectively; and the difference was significant (<math>P&lt;0.03</math>). The implementation rate of fundus examinations was increased to 43.30% in 2020.</p>
Conclusions/Lessons learned :	<p>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.</p>
Relevance to HPH :	<p>The proportion of people with type 2 diabetes is increasing in most countries. Empowerment is more than intervention or strategy to help people make behavior changes to adhere to a treatment plan. Patient empowerment is a continuous process in which knowledge, motivation, and capacity to control their disease built within a person. Health professionals should be aware of the skills and tools they should have to induce and support empowerment.</p>
Workshop/Symposium :	<p>National Yang Ming Chiao Tung University Hospital</p>
Keywords:	<p>TYPE 2 DIABETES EMPOWERMENT BEHAVIOR CHANGES SELF-EFFICACY; EDUCATION </p>
Comments:	<p>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.</p>

### 附錄三:摘要審查結果通知單

陳莠云

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寄件者: 賴琦琇  
寄件日期: 2021年8月17日星期二 上午 8:20  
收件者: 陳莠云  
主旨: FW: Your Abstract for the 28th International HPH Conference 2021

**From:** HPH Conference Secretariat [mailto:conference-secretariat@hphconferences.org]  
**Sent:** Monday, August 16, 2021 10:33 PM  
**To:** 賴琦琇 <11209@ymuh.ym.edu.tw>  
**Subject:** Your Abstract for the 28th International HPH Conference 2021

Dear Chi-Hsiu Lail

Thank you very much for submitting the abstract "Association between Utilization of Emergency Psychiatric Medical Services and Suicide among Adolescents in Taiwan" for presentation at the upcoming virtual 28th International Conference on Health Promoting Hospitals and Health Services with the title "Development of health-oriented health care management systems - How can health promotion optimize health gain and create more sustainable and equitable health systems?".

We are happy to inform you that the **Scientific Committee of the conference has accepted your abstract for Poster Presentation.**

Please consider the feedback from the reviewers: "The work can be a useful premise to support the growing of mental services in Taiwan to prevent an important problem such as the suicides in adolescents"

**Please prepare your poster as follows:**

- A4 format
- portrait format
- PDF format
- not less than 72 dpi and max 300 dpi

**To illustrate the poster on the virtual wall of the exhibition room:**

- a picture
- A4 format
- landscape or portrait format (not necessary the same as for the poster)
- JPEG or PNG format
- minimum 800px x 600 px, maximum 1280px x 720px

We will inform you how to upload your presentation in due time before the conference.

**IMPORTANT:** Please note that at least one author of this paper (the presenting author) will have to be registered for the conference by September 12, 2021 at the latest in order to keep your presentation in

the final conference program. You can register at  
<https://www.hphconferences.org/paris2021/registration/>.

**PAPERS OF AUTHORS WHO ARE NOT REGISTERED BY SEPTEMBER 12, 2021 WILL BE CONSIDERED AS DROP-OUTS!**

Please see details of the program on the conference website <https://www.hphconferences.org/paris2021/> and contact us at [conference-secretariat@hphconferences.org](mailto:conference-secretariat@hphconferences.org) if you have any further questions.

With best wishes,

The Team of the International Conference Secretariat

Competence Centre for Health Promotion in Hospitals and Health Care  
Gesundheit Österreich GmbH (Austrian National Public Health Institute)  
Stubenring 6, 1010 Vienna, Austria | t: +43 1 51561 380  
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**SAVE THE DATE**

**28<sup>th</sup> International Conference on Health Promoting Hospitals and Health Services**  
October 12, 2021 | virtual event | <http://www.hphconferences.org/paris2021>



## 附錄四:參與證明



### CERTIFICATE OF PARTICIPATION

Mr. Nicolas Bonnet, Director of the RESPADD, local host of the 28th International HPH Conference, certifies that

*Lai Chi Hsiu*

Participated in, the virtual event of:

« 28th International HPH Conference: Development of health-oriented health care management systems »

On Tuesday, October 12<sup>th</sup>.

Signature NB

Nicolas BONNET  
Director