



TAIPEI 臺北市

衛生醫療年鑑



2018

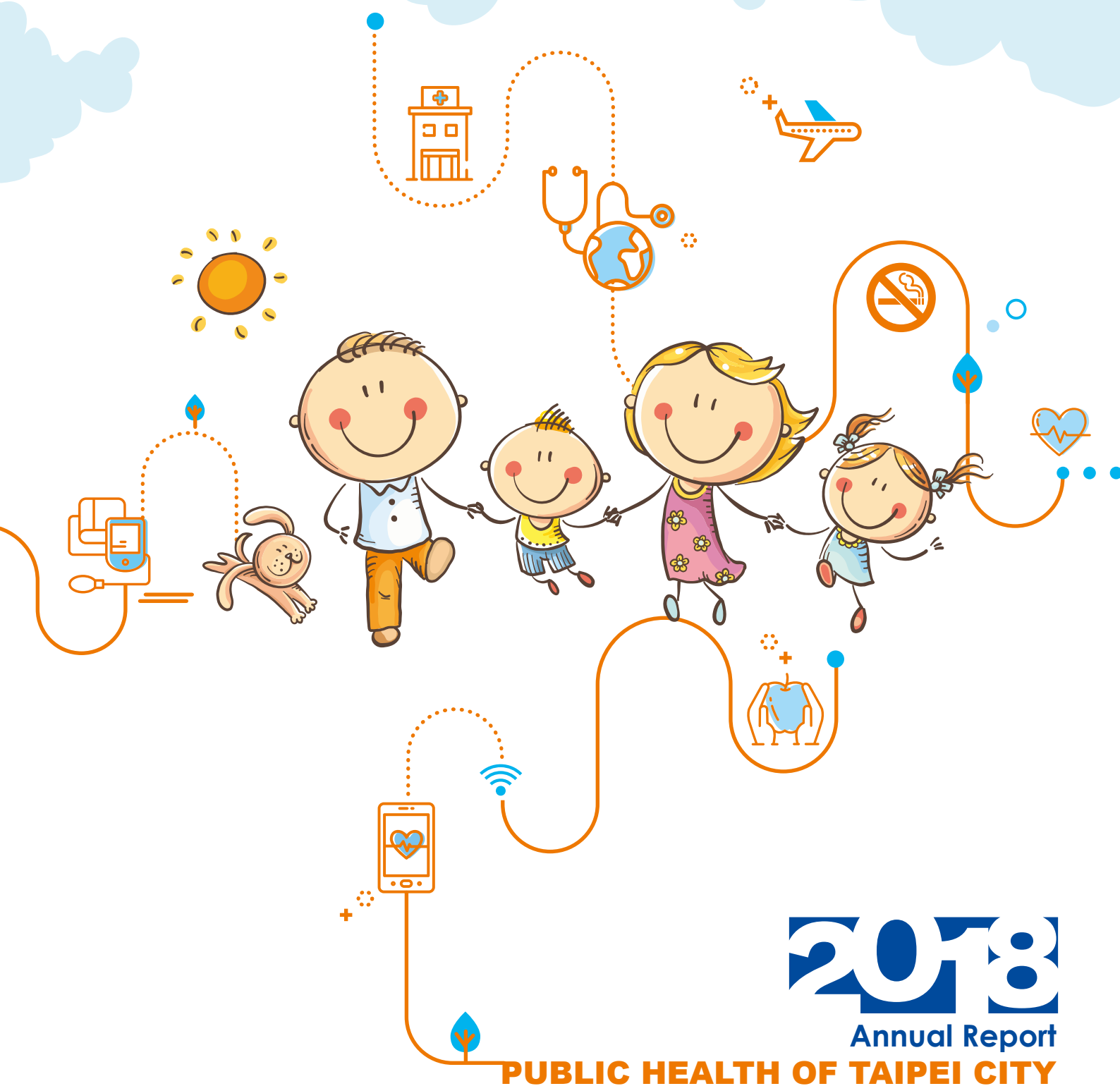
Annual Report

PUBLIC HEALTH OF TAIPEI CITY



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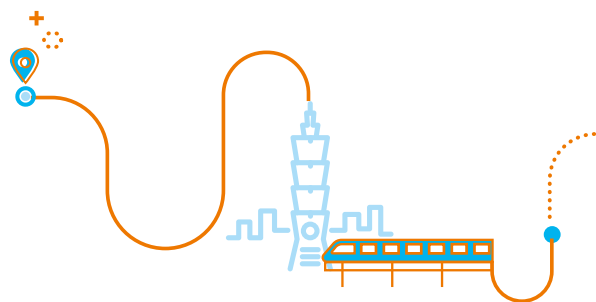
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PUBLIC HEALTH OF TAIPEI CITY

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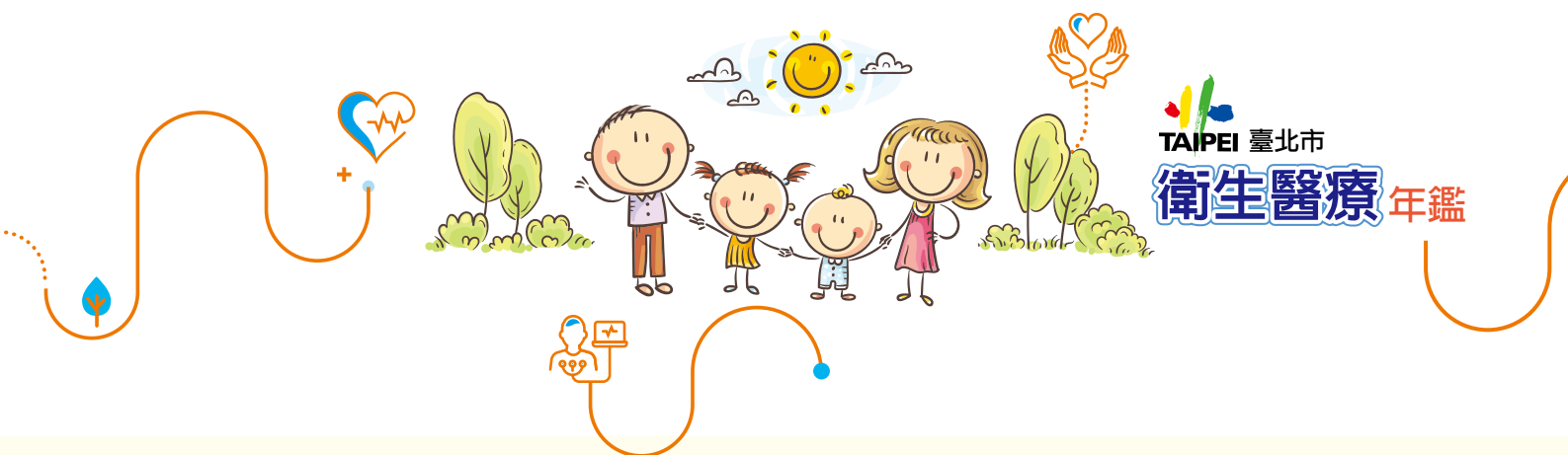
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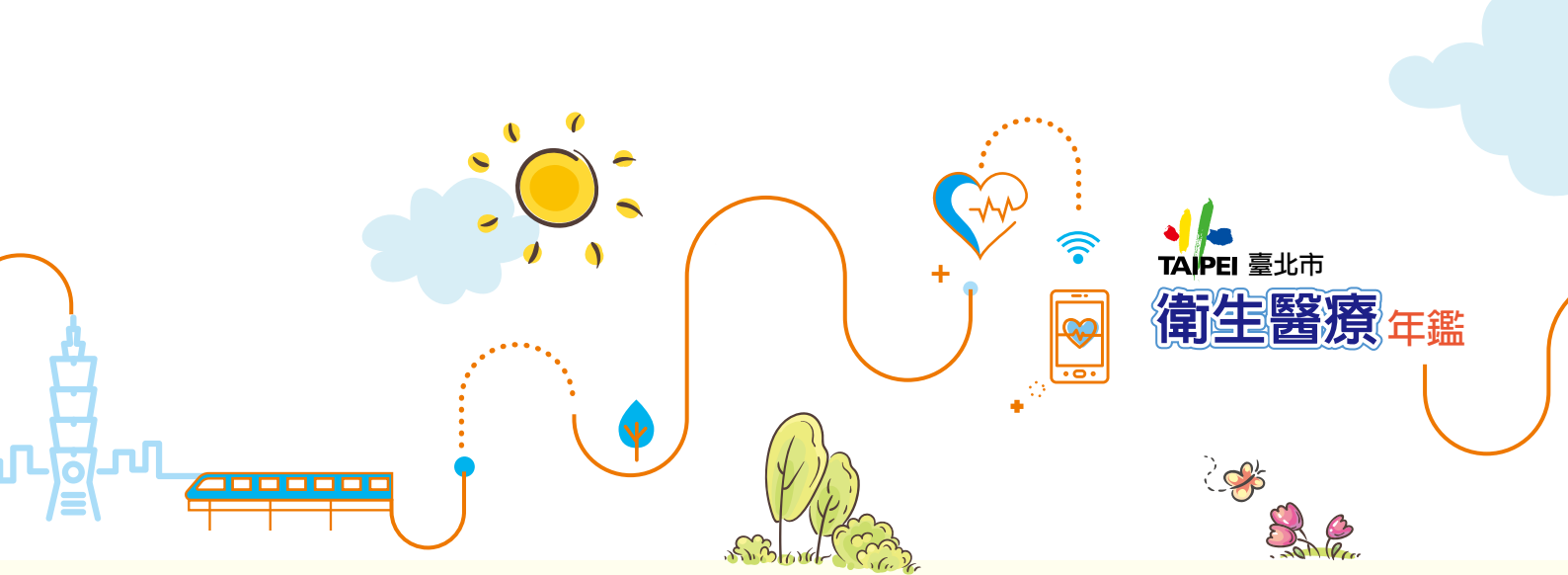
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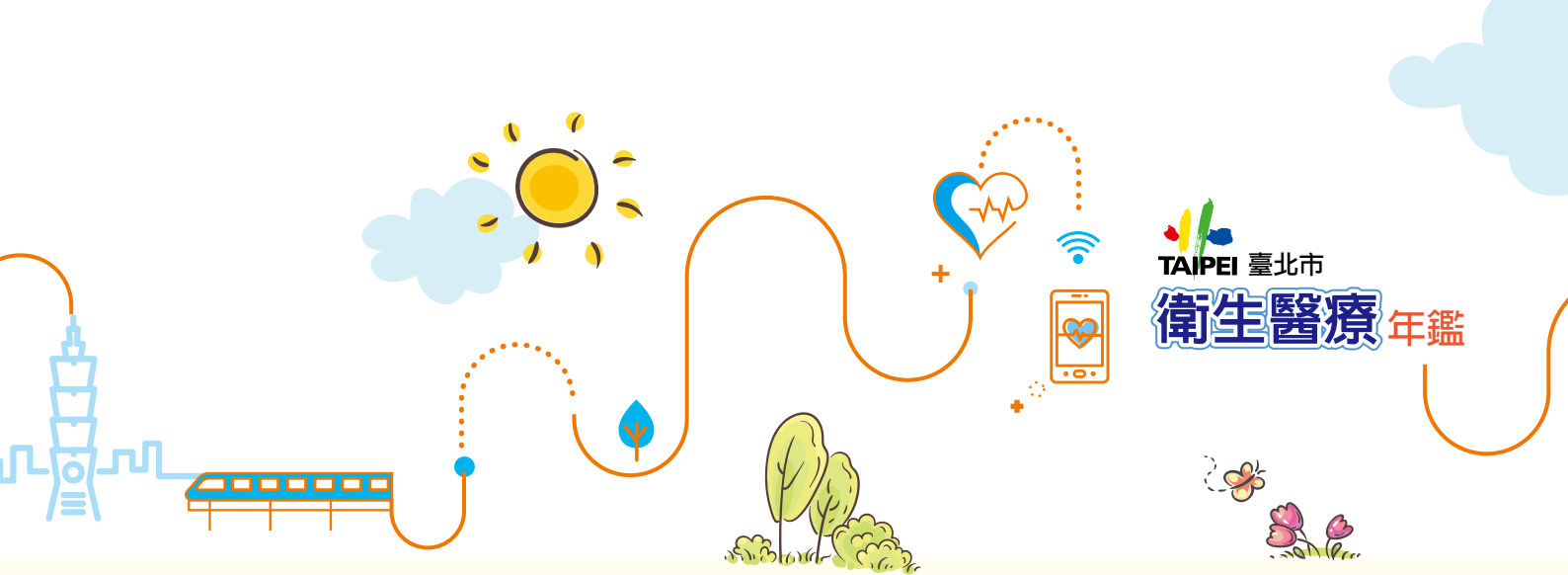
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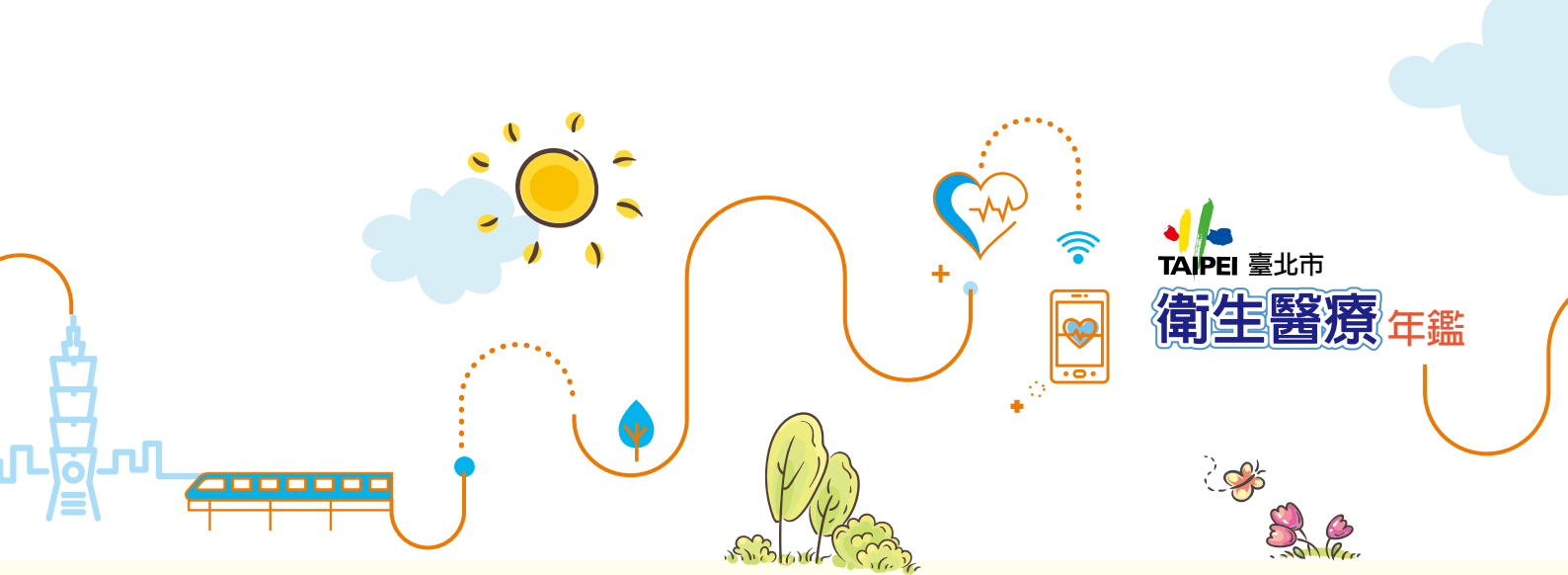
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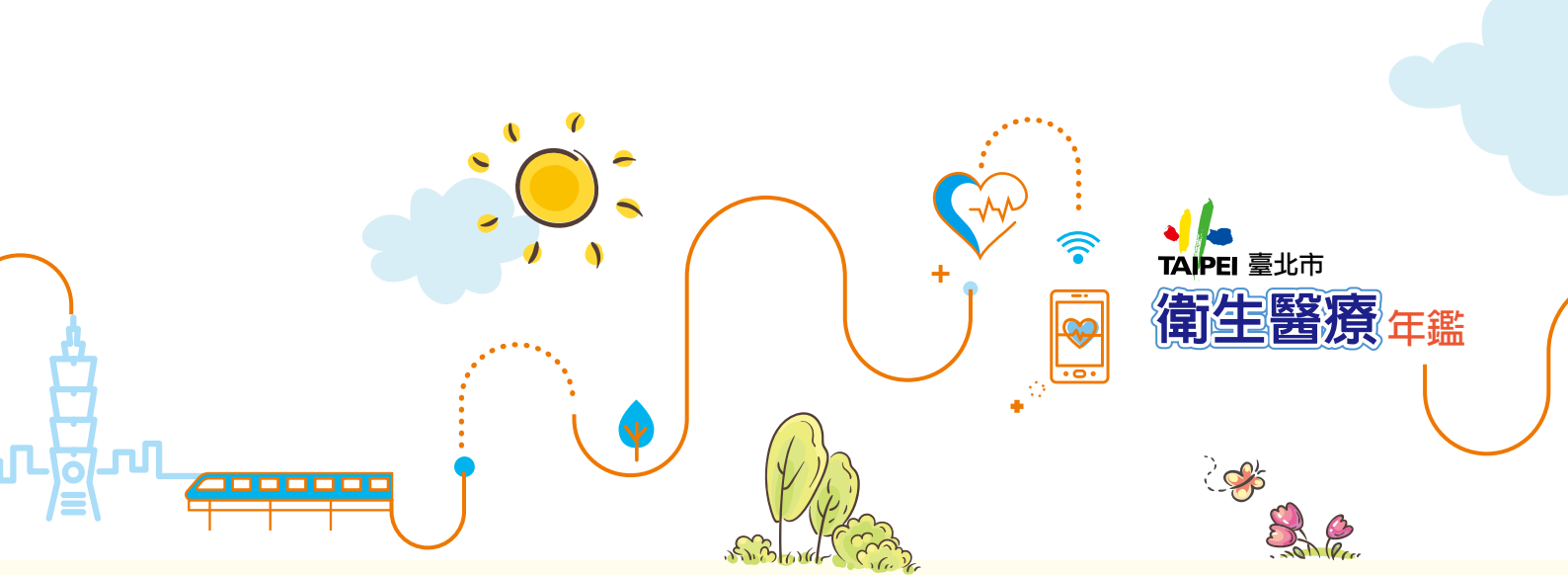
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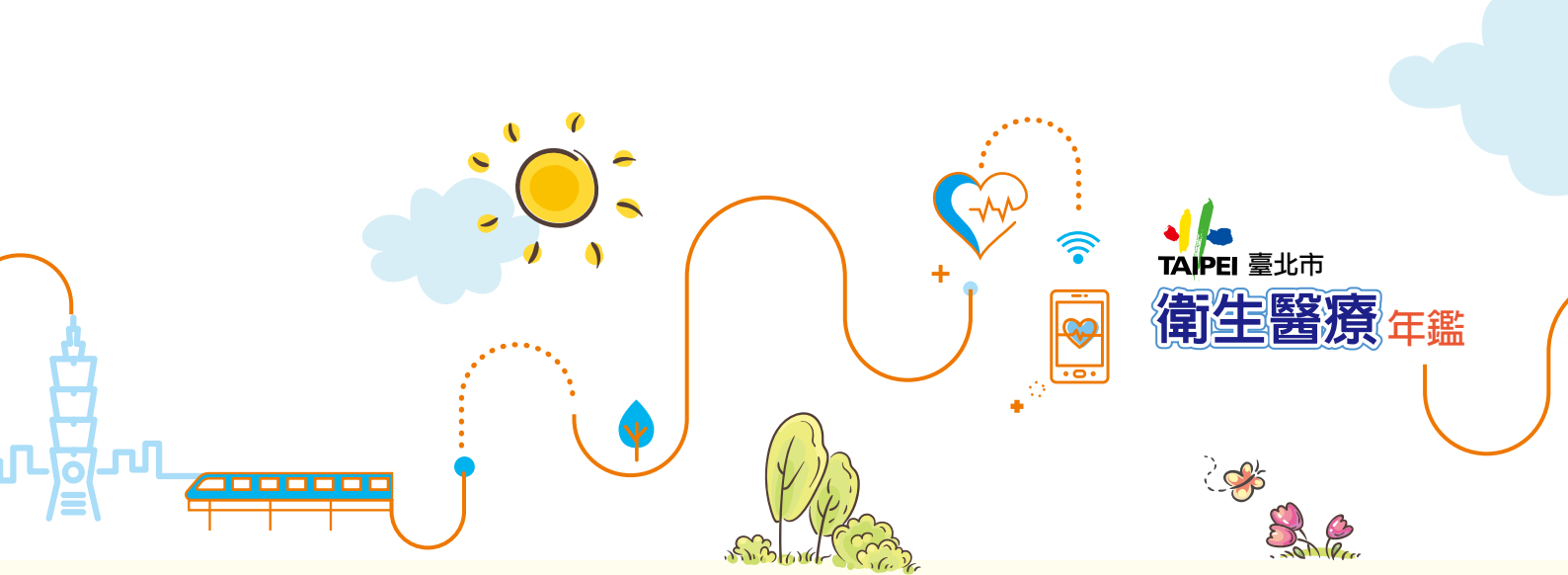
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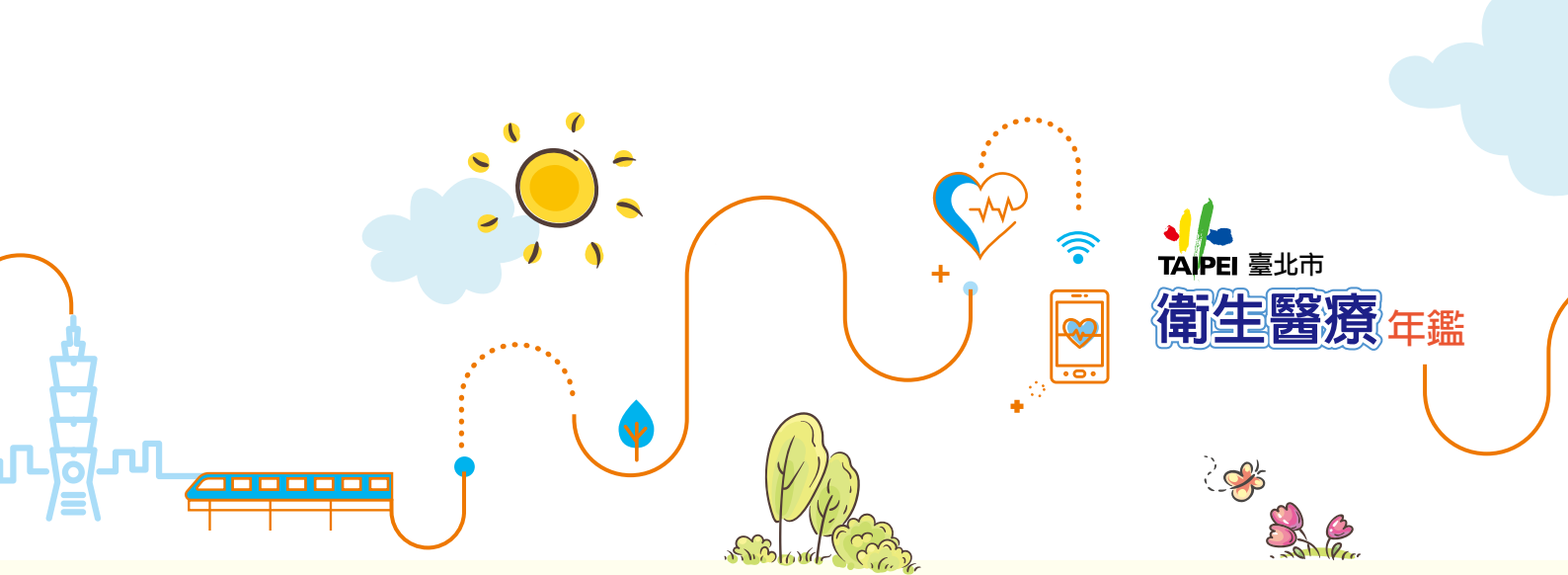
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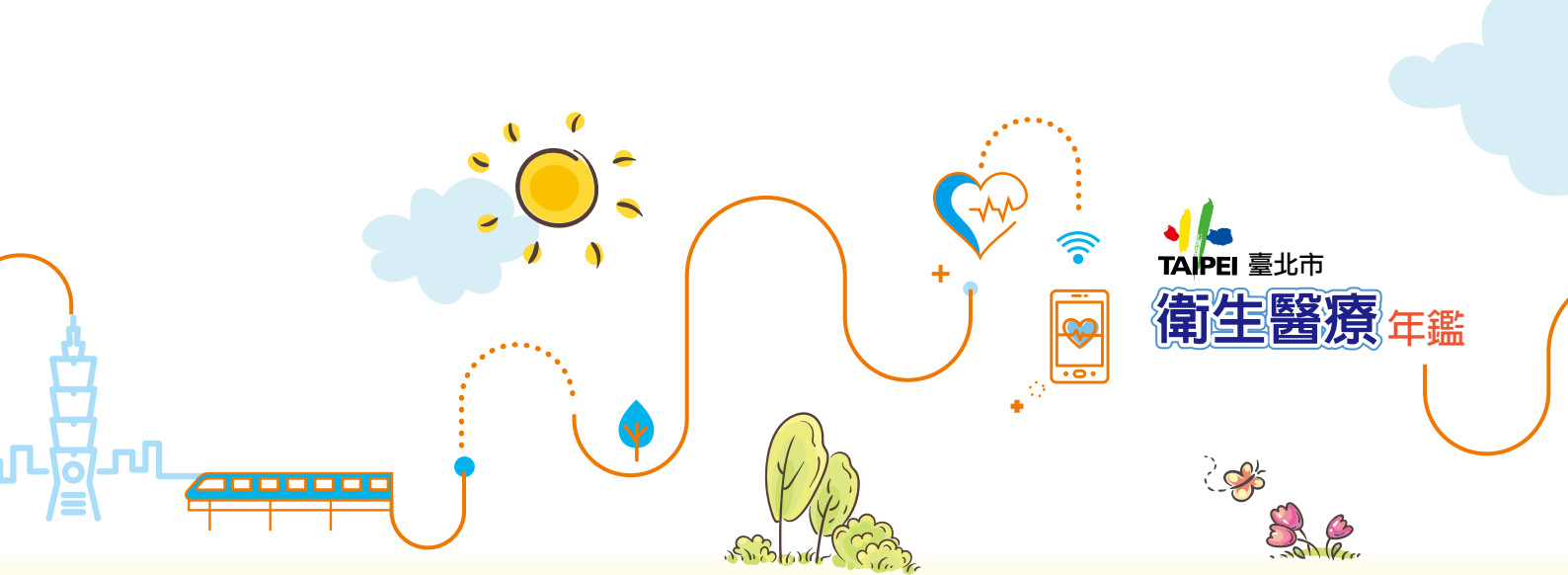
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局長序

民國 107 年臺北市政府衛生局承接臺北市政府策略地圖，以「精進健康安全」策略主題，使命為「促進市民健康安全」，願景為「打造亞洲第一健康城市」，定位為「衛生福祉的全方位領航者」，訂出六大主題推動服務分別為「強化食品安全」、「促進市民健康」、「精進防疫減毒」、「優化緊急救護」、「推廣貼心醫療」及「完善長照安寧」，秉持「正直誠信、團隊合作、創新卓越、開放共享、關懷當責」的核心價值，積極推動衛生與醫療政策。

在「強化食品安全」方面，臺北市政府衛生局為提升民眾對食藥粧安全的信賴，維護食藥粧安全資訊消費環境，及落實消費者權益保護，辦理「食品安全週」活動，採用故事行銷手法，並透過《食品安全自治條例》中「市民參與」、「安心外食」、「資訊透明」3 大章節，推出食品安全新政策，如：首創食安消爭調解庭、共餐據點食安把關、西式外燴報備、iMAP 商圈優化暨單一入口網及夜市食安微笑標章等，民國 107 年特別邀請衛生福利部食品藥物管理署及食安工作小組舉辦 2 場園遊會，強化宣導民眾食安資訊。107 年 3 月 17 日推出「臺北市食安資訊入口網」，提供臺北市民同時選擇臺北市食藥粧網路地圖（iMAP）及臺北市食材登錄平台，隨手即可查詢餐飲衛生動態稽查結果及食材來源資訊，隨時關心食品安全。

在「促進市民健康」方面，以健康促進與維護、健康城市、心理健康促進為目標，民國 107 年為能進一步分析臺北市市民癌症篩檢相關資料，全國首創以 API 方式介接國民健康署癌篩系統建置臺北市政府衛生局癌症篩檢資料倉儲系統，並定期自動化更新各項篩檢數據資料以即時訂定因應策略，有效改善通知流程，以確認市民健康問題及需求，聚焦顧客價值促進市民健康。衛生局建置臺北市「癌症防治便利網」，提供癌症防治宣導暨篩檢服務，辦理「台北卡－健康服務」集點兌換，提供健康篩檢集點活動等。為打造健康城市，結合臺北市政府 31 局處策略地圖共同推動，第 8 屆西太平洋健康城市國際研討會中榮獲 2 項創新發展獎，獲得國際肯定。





Preface by Commissioner

In 2018, The Department of Health, Taipei City Government (hereinafter referred to as the “Department”) continues to adhere to the strategic map of “better health and safety” as established by the Taipei City Government. With the mission of “promotion of the citizen’s health and safety”, the Department has set its eyes on “Making Taipei the Healthiest City in Asia” by taking on the role as “the holistic navigator of health and well-being”. To achieve our vision, we have established 6 major strategic themes for our services, namely: “enhance food safety”, “promote public health”, “improve disease and drug prevention”, “ameliorate emergency medical care”, “popularize cordial medical care” and “perfect long-term care and tranquility”. As we stay true to our core values of “honesty and integrity, openness and sharing, innovation and excellence, teamwork, care and conscientiousness”, the Department is committed to the active promotion of public health policies.

With regards to “enhance food safety”, in an effort to increase public confidence in food, drugs and cosmetics safety and maintain a safe and informed consumer environment for these products, the Department has organized the “Food Safety Week” series of activities and promote the “Citizen participation”, “Safe catering” and “Information transparency” 3 sections in the Taipei City Self-Governing Regulations for Food Safety, the Department has implemented new policies on food safety, such as the first tribunal for food safety disputes, food safety inspection at meal sharing locations, catering service reporting system, optimization of the iMAP business district map and portal website, the Food Safety Smile Certification for night market and so forth. In 2018, the Department has collaborated with the Food and Drug Administration and Food Safety Task force of the Ministry of Health and Welfare to organize two thematic fairs as a way to disseminate and disclose information pertaining to food safety. On March 17, 2018, the Department launched its “Taipei City Food Safety Portal Website” that features both the iMAP (map for food, drug and cosmetic products) and Food Tracer Taipei Platform for citizens to search for relevant food and beverage safety audit results and sources of food ingredients at any time to stay up to date on the issue of food safety.

As for “promote public health”, the Department has established specific objectives for the promotion of health maintenance, healthy city and mental health. In 2018, we have stepped up our services by analyzing Taipei City citizens’ cancer screening data and pioneered the construction of the Department’s cancer screening data storage system by connecting to NHI’s Cancer Screening System via API with scheduled and automatic updating of relevant screening data and statistics in order for the Department to formulate corresponding strategies. The system enables us to effectively improve our notification process by verifying various health issues and needs of citizens so that we can promote public health and focus on customer values. The Department has constructed the “Cancer Prevention Convenient Network” as a way to provide cancer prevention dissemination and relevant screening services in conjunction with the “Taipei Card: Health Service” for citizens to collect and redeem points by taking part in relevant health screening activities. In our effort to create a healthy city, the Department has been involved in the joint promotion of Taipei City Government Strategic Map for 31 Bureaus and Departments. In the 8th Global Conference of the Alliance for Healthy Cities, our commitment to health promotion has received international recognition as the Department received two Innovative Development Awards.



在「精進防疫減毒」方面，因應臺北市登革熱境外移入個案引發後續本土疫情之風險，臺北市政府衛生局推動「建構登革熱防疫網，社區診所快篩通報」，於民國 107 年增設 82 家社區診所提供登革熱快速篩檢，提升病例偵測效能，縮短個案發病至通報之隱藏期，於第一時間採取必要之防治措施，有效防範疫情擴散，107 年起，衛生局配合衛生福利部疾病管制署政策，推動「護理之家、安養及養護機構結核防治計畫」，與兩家安養護機構合作，提供胸部 X 光篩檢及潛伏結核感染檢驗，以主動發現結核病個案，並提供潛伏結核感染者預防性治療，降低其未來發病機率，進而減少機構結核病感染風險。107 年 3 月 20 日臺北市簽署國際性愛滋防治合作計畫「巴黎宣言」，成為「Fast-track Cities 愛滋快速通道城市」的一員，為華人地區之首，透過國際交流，建立經驗及資源共享管道。

在「優化緊急救護」方面，為提升緊急醫療體系效能，強化正確就醫觀念，宣導民眾「小病到小醫院，大病到大醫院」，民國 107 年廣續推動「到院前急診分流」及「醫學中心急診待床轉院計畫」，紓解醫學中心急診壅塞情形。為強化民眾體認 CPR 及 AED 的必要性，臺北市政府衛生局積極推廣市民急救技能訓練，教授市民 CPR + AED，亦闡明新修訂「緊急醫療救護法」之「善良撒瑪利亞人法」精神，適用緊急避難免責之「救人不罰」規範。

在「推廣貼心醫療」方面，臺北市政府衛生局為照顧更多社區弱勢族群，推動士林區、北投區「社區關懷醫師整合性照顧試辦計畫」。建構社區網絡資源，並號召當地基層醫師，以健康、專業、關懷為核心，提供低收、中低收、身心障礙及獨居長者關懷訪視服務。強化醫療人文關懷文化，提升醫病溝通量能。臺北市立關渡醫院於民國 107 年承辦臺北市政府社會局北投區社區整合照顧計畫（A 級單位），建立北投區關渡、唎哩岸社區整體照顧模式，串聯 B、C 級單位，整合北投區長照資源，讓各項服務發揮最大效益，以創造彈性多元化的服務，縮短長照服務對象與家屬的等待時間及家庭照顧需求。

在「完善長照安寧」方面，臺北市政府長期照顧委員會由市長擔任召集人，民國 107 年已召開 4 次會議並由社會局、民政局、財政局、教育局、交通局、勞動局、都市發展局、資訊局及法務局等相關局處組成委員會，建立跨部門整合機制，並聘請相關學者專家、民間機構團體代表及服務使用者代表，共同研商規劃臺北市長期照顧政策推動方向，開發長期照顧資源，以建構多元性、全面性的長照服務，並提升臺北市長期照顧服務品質及權益保障等相關事項。

臺北市政府衛生局為達到聯合國世界衛生組織「全民健康」之目標，守護市民健康與醫療照護，建構健康城市。強調永續發展，以全人關懷照顧，深耕社區服務，推廣貼心醫療，完善長照安寧，提倡以人為本，積極走入社區，追求人文關懷，創造醫療文化新價值，讓臺北市民活得更健康。期以「臺北健康城市」為守護臺北市市民健康的目標，提供市民最佳服務，並與世界衛生體系接軌，邁向國際健康城市。

臺北市政府衛生局

局長 黃世傑 謹幟



In the aspect of “improve disease and drug prevention”, in light of the risks of overseas cases subsequently causing domestic infections, the Department has sought to “construct a dengue fever prevention network with fast screening and reporting at community clinics”. In 2018, 82 additional community clinics were opened to provide the service of fast screening for dengue fever to enhance the effectiveness of infection detection and shorten the period between the time when symptoms first appear in a case and when the case is reported. This way, necessary preventive measures can be taken immediately to effectively contain the disease. Starting from 2018, in conjunction with the policy of Centers for Disease Control of the Ministry of Health and Welfare (CDC), the Department has promoted the “TB Prevention Plan for Nursing Homes/Care Institutions/Respite Care Centers”. The Department worked with two institutions and provided chest X-ray screening and latent tuberculosis infection (LTBI) test to improve active case finding and offer preventive treatment for LTBI cases so as to lower their chance of developing active TB in the future and thereby reducing the risks of TB transmission in the institutions. On March 20, 2018, representative of Taipei City signed the global partnership initiative “Paris Declaration” committing to accelerate and scale-up local HIV responses, and Taipei has become a member of the “Fast-Track Cities”. Taipei City is the first in the Chinese residential regions to join the partnership initiative and we will construct channels of experience and resource sharing in this area through international exchange and collaboration.

As for “ameliorate emergency medical care”, the Department endeavors to improve the efficacy of our existing system for emergency medical care by advocating the proper concept of “Seeking help for minor ailments at clinics and major conditions at accredited hospitals” amongst the citizens of Taipei. For 2018, we continued the promotion of “ER triage prior to arrival at hospital” and “Hospital transfer program for ER patients waiting for beds” to alleviate the congestions at the ER of medical centers. In an effort to help the general public foster better awareness for the necessity of CPR and AED, the Department has been actively promoting emergency skill trainings (i.e. application of CPR+AED) for members of the general public while disseminating the spirits of “Good Samaritan” that is incorporated in the newly amended “Emergency Medical Services Act” with indemnification clause applicable for emergency evacuations and performing first aid for saving others from immediate life-threatening danger.

In the area of “popularize cordial medical care”, the Department launched its “Pilot Project on the Integrated Care of Community Doctors” in Shilin and Beitou Districts in order to care for more underprivileged minorities in various communities. The project involves the construction of relevant community network and resources as we called out to local doctors to care and visit families in low-income, mid-low income households, physical and mental disabled citizens and seniors living in solitude by offering services with the core spirit of health, professionalism and care. By improving the applicability of communication between doctors and patients, we strive to foster the aspect of humanities and care in healthcare. In 2018, Taipei Municipal Gandau Hospital was commissioned by the Department of Social Welfare to act as the primary unit (Class A unit) in the Integrated Care Project for Beitou District Communities in the construction of a model of integrated care for residents of Guandu and Qilian Communities in Beitou District by connecting with relevant Class B and C (i.e. secondary and tertiary) units to integrate relevant long-term care resources in Beitou District in order to optimize the effectiveness of various services. Our goal is to create versatile and diversified services to shorten the waiting time for care recipients and their families and accommodate their demands for home care.

To facilitate the “perfect long-term care and tranquility”, the Mayor serves as the convener of the Long-Term Care Committee, Taipei City Government. 4 meetings were held in 2018. It comprises the Department of Social Welfare, Department of Civil Affairs, Department of Finance, Department of Education, Department of Transportation, Department of Labor, Department of Urban Development, Department of Information Technology, and Department of Legal Affairs. The Long-Term Care Committee establishes a cross-department integration mechanism. Scholars, experts and the representatives from the private institutions and organizations as well as the service users are invited to discuss and plan the promotion direction of the long-term care policies in Taipei City and develop long-term care resources in order to provide diversified and nation-wide long-term services, improve the long-term care quality of Taipei City, and protect related rights and interests.

In order to achieve the goal of “Health for all” envisioned by the World Health Organization, the Department of Health is committed to the protection of citizens’ health and medical care as we endeavor to create a healthy city. With an emphasis on sustainable development, the Department shall strive to deliver holistic care, enhance community services, promote cordial medical care, perfect long-term care and tranquility by advocating human-centered practices as we actively involve ourselves in communities and provide better care so that we can create new values in Taipei City’s cultures of medical care and help citizens lead healthier lives. With our eyes on “Healthy Taipei City” as the Department’s objective in safeguarding the health of Taipei City citizens, we shall provide the best services, and align ourselves with global health systems to transform Taipei into a world-class healthy city.

Department of Health, Taipei City Government

Commissioner **Shier-Chieg Huang**

第一篇 行政組織 與概述

1

Administrative Organization and General Descriptions





第一篇 行政組織與概述

第一章 行政組織架構

臺北市政府衛生局暨所屬醫療院所為因應國際衛生醫療發展趨勢，晉身為國際級之健康都市，與中央衛生機關接軌，建立事權統一之責任機制，俾使權責分明、各司其職，使現有人力配置，發揮最佳效能，提升服務效率，遂於民國 92 年至 93 年間檢討修正衛生局及所屬醫療院所組織編制，衛生局由七科八室重整為



五處七室，10 家醫療院所整併為臺北市立聯合醫院，十二區衛生所改制為十二區健康服務中心。全案經臺北市議會 93 年 7 月 7 日第 9 屆第 10 次臨時大會第 8 次會議三讀審議通過，臺北市政府 93 年 8 月 4 日府法三字第 09312728300 號令發布，定於 94 年 1 月 1 日生效。

基於防疫業務之重要性及新型傳染病（如 H5N1 流感）之增加，應落實平時之防治，以確保防疫網之健全，及為統一衛生稽查、強化工作效能，設聯合稽查隊及分隊。爰修正臺北市政府衛生局組織規程暨編制表，經臺北市議會民國 100 年 11 月 2 日第 11 屆第 2 次定期大會第 8 次會議三讀審議通過，臺北市政府 100 年 12 月 2 日府法三字第 10034218700 號令發布，自 100 年 12 月 4 日生效。

因應民國 104 年 6 月 3 日公布之《長期照顧服務法》，思考未來老人及失能人口之增加，精神病患關懷訪視業務之增加，規劃設「長期照護科」、「心理衛生科」二專責單位及請增必要人力；回應市民對食品安全議題之關心、食品稽查業務激增，將派出單位聯合稽查隊改設「衛生稽查科」；因應資訊業務擴增請增人力，爰遵「地方行政機關組織準則」及各有關組織法規進行全面性檢視，修正臺北市政府衛生局組織規程及編制表，由五處七室重整為九科六室，經臺北市議會 106 年 5 月 3 日第 12 屆第 5 次定期大會第 5 次會議三讀審議通過，臺北市政府 106 年 6 月 29 日府法綜字第 10632045700 號令發布，自 106 年 7 月 1 日生效。



Part 1 Administrative Organization and General Descriptions

Chapter 1 Organization

Medical institutions under the Department of Health, Taipei City Government (hereinafter referred to as “the Department”) have responded to global trends in healthcare development in order to transform Taipei into a world-class, healthy city. The Department is working with central health organizations to create a dedicated system with consolidated executive powers and authority for these purposes. The system has divided the various responsibilities to ensure that every organization fulfills its duties and obligations and achieves the best performance at current human resource allocation levels, and improves the efficiency of the services provided. The organization of medical institutions under the Department of Health was reviewed and revised from 2003 and 2004. The structure of the 7 divisions and 8 offices was reorganized into 5 divisions and 7 offices. A total of 10 medical institutions were merged into the Taipei City Hospital, while the 12 district health stations were reorganized into 12 district health centers. The entire proposal was reviewed three times and approved at the 8th Meeting during the 10th Interim Meeting of the 9th City Council held on July 7, 2004. The Taipei City Government officially released the proposal in the Fu-Fa-San-Zi Order No.09312728300 of August 4, 2004 which came into effect on January 1, 2005.

Given the importance of disease prevention as well as the emergence of new infectious diseases (such as the H5N1 influenza), preventive measures shall be constantly enacted at all times to ensure the integrity of the disease prevention network. Joint audit task forces and teams were also established to consolidate auditing work and improve work performance. The organizational regulation and framework of the Department of Health, Taipei City Government were amended and were thrice reviewed and approved at the 8th Meeting during the 2nd Regular Meeting of the 11th City Council held on November 2, 2011. The Taipei City Government officially released the proposal in the Fu-Fa-3-Zi Order No.10034218700 on December 2, 2011, before it came into force on December 4, 2011.

The new “Long-Term Care Division” and “Mental Health Division” were set up with required manpower to implement the “Long-Term Care Service Act” promulgated on June 3, 2015 and adapt to the increasing elderly and disabled population as well as the business of care for psychotics and visit to these people. To address the concern of the citizens about food safety and act in response to the rapid increase of the food inspection business, the Joint Inspection Team was reorganized to the “Public Health Inspection Division”. In light of our expanded IT operations, the Department has requested for additional manpower and implemented a thorough review of its existing organizational structure and framework pursuant to “Criteria of Local Administrative Organization” and other pertinent organizational regulations. From our former structure of 5 divisions and 7 offices, the Department was restructured to 9 sections and 6 offices. The restructuring was reviewed and approved at the 5th Regular Meeting of the 12th City Council held on May 3, 2017. Taipei City Government officially released the proposal in the Fu-Fa-Zhong-Zi Order No.10632045700 on June 29, 2017, before it came into force on July 1, 2017.



臺北市政府衛生局組織重整設九科六室業務職掌如下，綜合企劃科：綜合計畫、研究發展、管制考核、國際衛生合作、公共關係、議事、綜合業務宣導及衛生業務訓練等事項。疾病管制科：疫情監測、調查、訓練與醫院院內感染控制事項、規劃疫苗接種之政策與執行、社區傳染病與新興傳染病之防治、外勞與營業衛生從業人員之防疫及委任臺北市立聯合醫院辦理疾病防治等事項。食品藥物管理科：藥政、藥品、醫療器材、化粧品、食品衛生管理、健康飲食推動、諮詢及管理等等事項。醫事管理科：醫事行政、醫事機構管理、醫事人員管理、緊急救護及醫療爭議調處等事項。健康管理科：健康管理與保健業務之推展、監督、規劃及考核等事項。長期照護科：提供長照服務、制定轄內長照政策、長照體系之規劃、宣導與執行、辦理地方之長照服務訓練、長照機構之督導考核及特殊照護等事項。心理衛生科：心理健康促進與輔導、精神疾病防治、性侵家暴處遇、自殺防制等業務之規劃、推展、監督及考核等事項。衛生稽查科：衛生相關法規人民申請案現場履勘、人民陳情與檢舉違規案件稽查、各業別例行或計畫性稽查、抽驗、輔導及食品中毒調查處理等事項。檢驗科：食品、藥物與公共衛生檢驗與支援公共衛生相關稽查樣品檢驗、投訴檢舉專案檢驗及受理飲食品藥物申請檢驗等事項。資訊室：業務電腦化與辦公室自動化之規劃、推動、管理與所屬各單位實施資訊作業之督導及輔導等事項。秘書室：文書、檔案、出納、總務、財產之管理及不屬於其他各單位事項。會計室：依法辦理歲計及會計事項。統計室：依法辦理統計事項。人事室：依法辦理人事管理事項。政風室：依法辦理政風事項。

原臺北市立仁愛、忠孝、和平、中興、陽明、婦幼、療養院、中醫、慢性病防治院及性病防治所等10家醫療院所整併為臺北市立聯合醫院，以強化績效制度、品質管理、醫學教育、社區醫學、物流採購、人事、會計等統籌規劃、管理以達到監督、輔導與研擬總體經營策略之目的。同時參與地方衛生政策規劃、分析與評估功能，釐清政策制定與行政執行權責，支援地方公共衛生行政體系業務。





The reorganized 9 divisions and 6 offices of the Department are responsible for the following matters, respectively. General Planning Division: Integrated projects, research and development, control assessment, international health collaboration, public relations, meetings, promotion of integrated activities and health related training. Disease Control Division: Epidemic monitoring, investigation, training, and nosocomial infection control; planning and enforcement of vaccination policies; prevention of community epidemics and emerging infectious diseases; disease prevention amongst foreign laborers and personnel in the field of business sanitation; and commissioning Taipei City Hospital in activities related to disease prevention. Food and Drug Division: Drug policies, pharmaceuticals, medical devices, cosmetics, food sanitation control, promotion of healthy diets, consultation services and management. Medical Affairs Division: Hospital administration, hospital management, medical personnel management, emergency care, medical dispute mediation. Health Promotion Division: Promotion, monitoring, planning and assessment of health management and health care services. Long-Term Care Division: Provision of long-term service, establishment of long-term care policies within the specified territory; planning, dissemination and execution of long-term systems; local long-term care service training; supervision and direction of long-term institutions, and special care matters. Mental Health Division: Promotion and guidance of mental health, prevention of mental disorder; planning, promotion, monitoring and assessment of sexual assault and domestic violence treatment, and suicide prevention. Public Health Inspection Division: Health related regulations, on-site survey upon application by citizens, inspection in appealing and violation reporting cases; routine or planned inspection, random inspection or guidance of individual industries; investigation and handling of food poisoning cases. Laboratory Division: Testing of food, drugs and other samples related to public health, testing of samples taken from audits related to public health, testing of samples from reported complaints, and food and drugs testing for licensing purposes. Information Technology Office: Planning, implementation and management of digitalization of services and office automation; supervision and consultation of IT related activities of various units. Administration Services Office: Documentation, filing, billing, general affairs, financial management and other tasks not under the responsibility of other organizations. Accounting Office: Financial accounting and general accounting according to the law. Statistics Office: Statistics related activities carried out according to the law. Personnel Office: Management and implementation of HR activities according to law. Government Ethics Office: Management and enforcement of government ethics according to the law.

To achieve the objectives of proper supervision, consultation and formulation of overall operational strategies, a total of 10 municipal medical care institutions (Renai, Zhongxiao, Heping, Zhongxing, Yangming, Fuyou, the Sanatorium, Traditional Chinese Medicine (TCM), Chronic Diseases and Sexually Transmitted Disease (STD) Control) were integrated to form the Taipei City Hospital to improve system performance, quality management, medical training, community healthcare, logistics and purchasing, HR, accounting, and other coordination, planning and management activities. The Department also participated in local health policy planning, analysis and performance assessments to define separate responsibilities for stipulating and enforcing relevant policies and to support local public health administrative systems.



臺北市立聯合醫院自民國 94 年 1 月 1 日裁撤原臺北市立 10 家醫療院所並整合業務成立後，為推展長期照護政策，陸續設立護理之家、居家護理所與產後護理之家等護理機構，以及職能工作坊等精神復健庇護工場。為明訂上述機構設置之依據，並將 94 年整合時未及釐清之全市疫情監測、社區傳染病、新興傳染病防疫任務及優生保健等公共衛生行政業務，移回臺北市府衛生局主政，以期指揮監督權責相符；另為符合醫院評鑑標準及考試院會同行政院發布之「各機關醫事職務級別員額配置準則」相關規定，爰配合修正該院組織規程及編制表，經臺北市府 101 年 7 月 17 日第 1689 次市政會議審議通過，臺北市府 101 年 8 月 16 日府法三字第 10132354700 號令發布，溯自 100 年 12 月 4 日生效。

臺北市十二區衛生所修編改制為健康服務中心，其組織任務及功能與原衛生所有所區別，健康服務中心以個案管理及健康促進為主軸，強化公共衛生服務之推展，包含：輔導成立社區健康營造點、推動健康職場、志工經營管理、推動母乳哺育、運動事故防範、社區心理健康促進、健康議題防制宣導等事項。至於原衛生所防疫業務，則改隸屬於臺北市府衛生局疾病管制科及臺北市立聯合醫院。另為應社區心理衛生服務、長期照護服務及社區健康照護等業務增加，調整員額配置並增加編制人力，爰修正健康服務中心組織規程及編制表，經臺北市府民國 105 年 11 月 1 日第 1910 次市政會議及 106 年 4 月 5 日第 1931 次市政會議審議通過，臺北市府 105 年 12 月 1 日府法綜字第 10534361600 號令及 106 年 5 月 5 日府法綜字第 10631418300 號令發布，溯自 105 年 12 月 3 日生效。





After removing the registration of the 10 medical institutions in Taipei City and consolidating them into a single Taipei City Hospital on January 1, 2005, nursing institutions such as nursing homes, home care and postpartum nursing care centers well as occupational workplaces and other sheltered workshops for mental rehabilitation were established to promote the long-term care policy. To establish a documented basis for establishing the aforementioned institutions and to integrate public health administrative operations that are yet to be clearly defined, such as city-wide disease monitoring, infectious diseases in communities, emerging diseases prevention missions, and genetic health, the authority governing these topics was moved back to the Department in 2005 to ensure consistency in command and supervision responsibilities. The organizational structure and framework of the Department were adjusted in order to comply with the standards of hospital accreditation and "Standards for Allocating Personnel for Medical Positions in Various Agencies" jointly released by the Examination Yuan and Executive Yuan. These adjustments were passed by the Taipei City Government in the 1689th City Government Meeting on July 17, 2012 and then released by the Taipei City Government in the Fu-Fa-San-Zi Order No.10132354700 on August 16, 2012, and shall be retroactively effective starting from December 4, 2011.

The 12 district health stations of Taipei City were reorganized into district health centers and have different organizational missions and functions compared to the original health stations. With case management and health promotion as their major operations, the district health centers will strengthen the promotion of public health services, including assisting communities to form health management stations, promote healthy workplace, manage volunteers, promote breastfeeding, prevent sport accidents, promote community mental health, propagate health issues and other issues. As for the original epidemic prevention operations conducted by the health stations, it is now under the administration of the Division for Disease Control and Prevention, the Department of Health, Taipei City Government and Taipei City Hospital. Also, in response to increasing tasks such as community mental health services, long-term care services and community health care, the personnel configuration was adjusted and authorized subsidies have increased. The organizational regulation and framework of the district health centers were amended and were approved at the 1910th City Government Meeting held on November 1, 2016 and the 1931st City Government Meeting held on April 5, 2017. The Taipei City Government officially released the proposal in the Fu-Fa-Zong-Zi Order No.10534361600 on December 1, 2016 and the Fu-Fa-Zong-Zi Order No.10631418300 on May 5, 2017, which came into force on December 3, 2016.

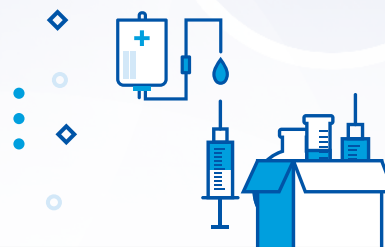




第一篇
行政組織與概述

臺北市政府
Taipei City
Government

衛生局
Department
of Health



綜合企劃科
General Planning Division

研究發展、國際合作、
管制考核、綜合企劃
Research and development,
international collaboration,
control assessment,
integrated projects

疾病管制科
Disease Control Division

預防接種、感染管制、
急性傳染病、慢性傳染病
Immunization, infection control,
acute infectious disease,
chronic infectious disease

食品藥物管理科
Food and Drug Division

證照管理、廣告稽查、違規處理、
產業輔導、衛生查驗、消費者保護
License management, advertisement
inspection, handling of violations, food,
drug and cosmetics manufacturer
guidance, hygiene, inspection, consumer
protection

醫事管理科
Medical Affairs Division

醫政管理、醫事品質、緊急醫療
Medical administration,
medical quality,
emergency medical care

健康管理科
Health Promotion Division

健康促進、婦幼及優生保健、兒童及青少年
保健、癌症防治、成人保健、菸害防制
Promotion of health, maternal and child
health and eugenic health, children
and adolescents healthcare, cancer
prevention, adult healthcare, tobacco
hazards control

長期照護科
Long-Term Care Division

長照管理、長照服務、特殊照護
Long-term care management,
long-term care service,
health care for minority

心理衛生科
Mental Health Division

精神衛生、處遇防治、自殺防治
Mental health,
treatment and prevention,
prevention of suicide

衛生稽查科
Public Health Inspection Division

衛生違規案件稽查
Inspection of health violations

檢驗科
Laboratory Division

公共衛生檢驗及食品檢驗
Public health inspection and
food inspection

資訊室
Information Technology Office

公共衛生與國際資訊管理
Food, drug and public health examination
and support for test of public health
related inspection samples.
Payment test for citizen and companies

秘書室
Administrative Services Office

財產、文書管理、庶務及出納
Assets and document management,
general affairs, and cashier

會計室
Accounting Office

歲計、會計
Financial accounts and accounting

統計室
Statistics Office

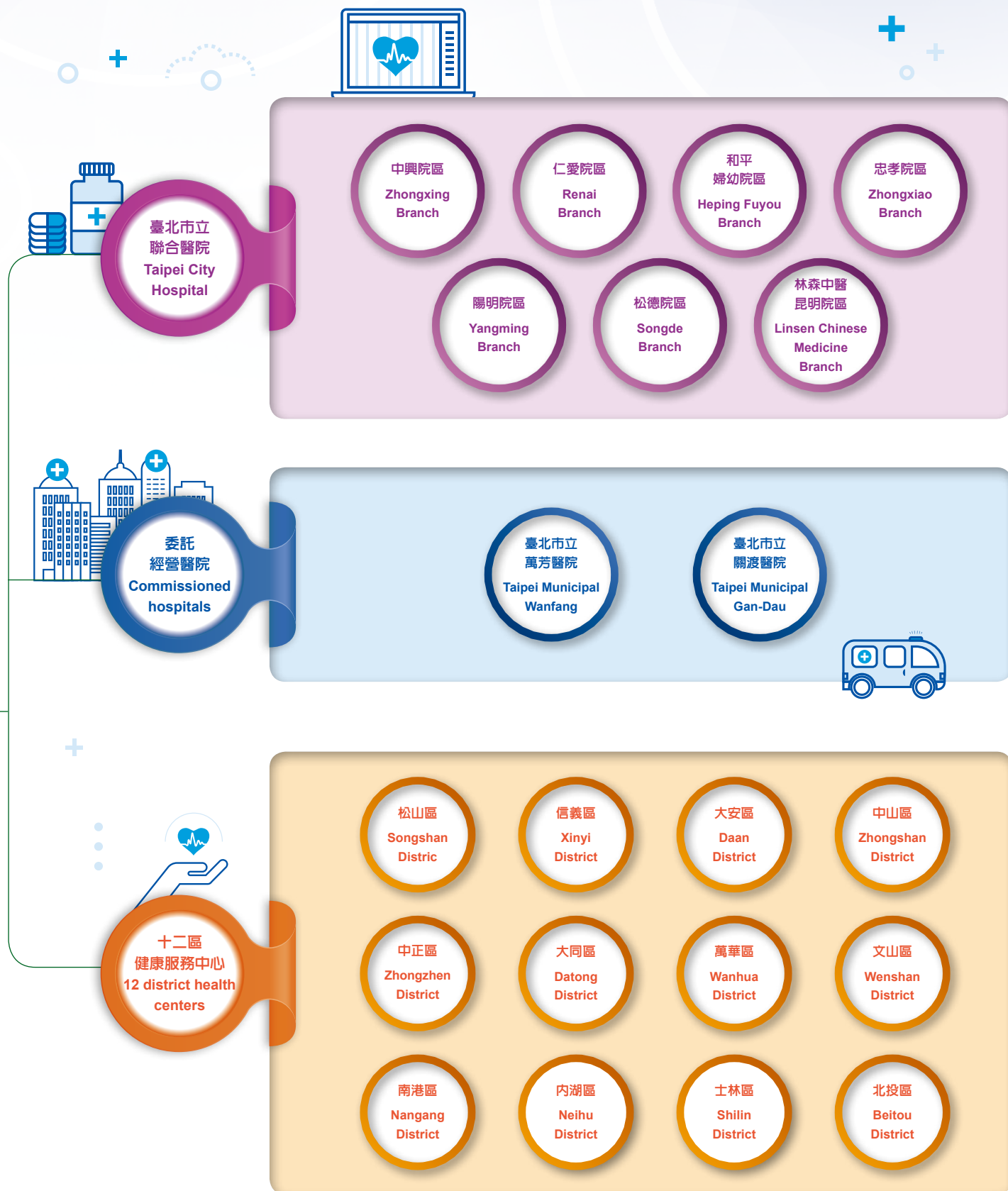
生命統計、公務統計
Vital statistics and
administration statistics

人事室
Personnel Office

人事管理
Personnel management

政風室
Government Ethics Office

貪瀆不法之預防及查處、
公務機密維護
Prevention, investigation and
discipline of corruption;
maintenance of administrative security



▲ 圖 1 臺北市政府衛生局民國 107 年組織系統圖

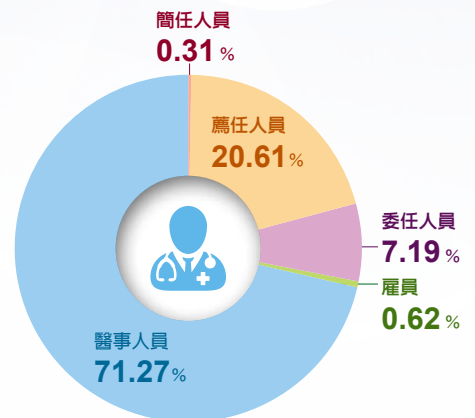
Figure 1 Organization of the Department of Health, Taipei City Government, 2018



第二章 機關人力概況

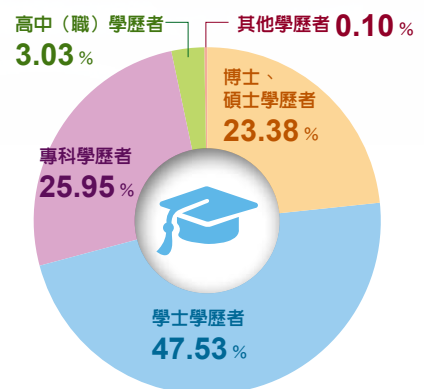
一、職等情形

以職等別而言，現有編制人力總數 1,946 人（不含委託經營的臺北市立萬芳醫院及關渡醫院），計有簡任人員 6 人，占 0.31%；薦任人員 401 人，占 20.61%；委任人員 140 人，占 7.19%；雇員 12 人，占 0.62%；醫事人員 1,387 人，占 71.27%。



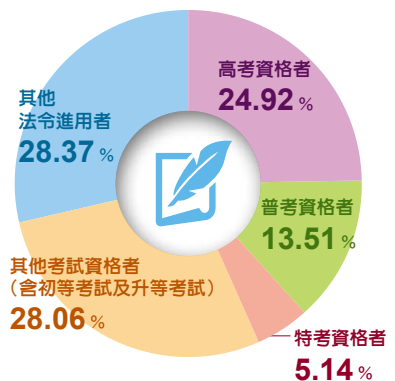
二、學歷情形

現有編制人力學歷分布（未含臺北市立萬芳醫院及關渡醫院），具博士、碩士學歷者 455 人，占 23.38%；具學士學歷者 925 人，占 47.53%；具專科學歷者 505 人，占 25.95%；具高中（職）學歷者 59 人，占 3.03%；其他學歷者 2 人，占 0.10%。



三、考試資格情形

現有編制人力考試資格分布（未含臺北市立萬芳醫院及關渡醫院）具高考資格者 485 人，占 24.92%；具普考資格者 263 人，占 13.51%；具特考資格者 100 人，占 5.14%；其他考試資格者（含初等考試及升等考試）546 人，占 28.06%；依其他法令進用者 552 人，占 28.37%。



第三章 107 年主管預決算

一、主管預算

臺北市政府衛生局暨所屬健康服務中心民國 107 年主管預算，計列新臺幣 54 億 194 萬元，占臺北市地方總預算新臺幣 1,741 億 9,689 萬元之 3.10%，臺北市立聯合醫院醫療基金預算計列業務總支出新臺幣 148 億 2,922 萬元。

二、主管決算

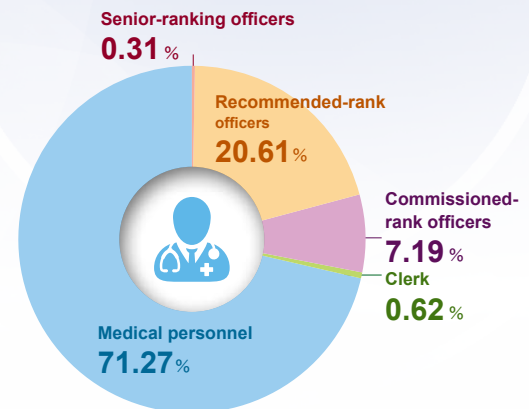
臺北市政府衛生局暨所屬健康服務中心民國 107 年主管決算計列新臺幣 52 億 3,760 萬元，占臺北市地方總決算新臺幣 1,670 億 2,773 萬元之 3.14%，臺北市立聯合醫院醫療基金決算計列業務總支出新臺幣 149 億 5,140 萬元。



Chapter 2 Overview of Human Resources

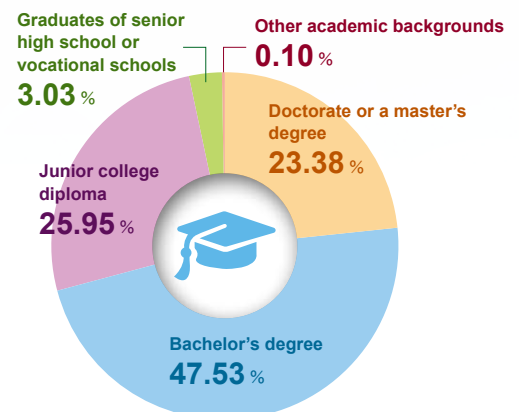
1. By Position

The Department currently employs 1,946 individuals (not including those of the Taipei Municipal Wanfang Hospital and Gan-Dau Hospital). The current staff is composed of 6 senior-ranking officers (0.31%), 401 recommended-rank officers (20.61%), 140 commissioned-rank officers (7.19%), 12 Clerk (0.62%), and 1,387 medical personnel (71.27%).



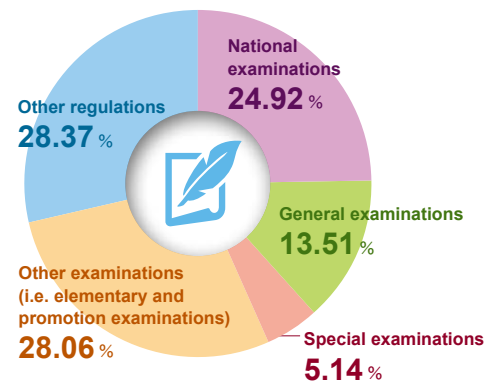
2. By Education

The following lists the distribution of academic background amongst the currently employed personnel (not including those of the Taipei Municipal Wanfang Hospital and Gan-Dau Hospital). 455 individuals have either a doctorate or a master's degree (23.38%), 925 individuals have a bachelor's degree (47.53%), 505 individuals have a junior college diploma (25.95%), 59 individuals were graduates of senior high school or vocational schools (3.03%), while 2 individuals have other academic backgrounds (0.10%).



3. By Qualifying Examinations

The following lists the distribution of examination qualifications among the currently employed personnel (not including those of the Taipei Municipal Wanfang Hospital and Gan-Dau Hospital). 485 individuals qualified for the national examinations (24.92%), 263 individuals qualified for the general examinations (13.51%), 100 individuals qualified for the special examinations (5.14%) ; There were a total of 546 individuals who qualified for other examinations (i.e. elementary and promotion examinations) and they make up 28.06% of our staffs; 552 individuals were employed under other regulations (28.37%).



Chapter 3 2018 Budget and Financial Statement

1. Budget

The budget of the Department and its affiliated health centers in 2018 was NT\$5,401,940,000, which took up 3.10% of the total NT\$174,196,890,000 budget of Taipei City. The total operational expenditure of the medical fund budget of Taipei City Hospital was NT\$14,829,220,000.

2. Financial Statement

The financial statement of the Department and its affiliated health centers in 2018 was NT\$5,237,600,000, which took up 3.14% of the total NT\$167,027,730,000 financial statement of Taipei City. The total operational expenditure of the medical fund financial statement of Taipei City Hospital was NT\$14,951,400,000.



第四章 服務品質

第一節 全面提升服務品質

臺北市政府衛生局本著為臺北市市民創造優質醫療照護，提升醫療服務品質水準，透過醫療保健為民衆提供多元服務，涵蓋預防保健、菸害防制、疾病防治、醫療資源整合，營業場所及藥物、化粧品、食品衛生管理及各項公共衛生政策推動。

臺北市政府衛生局為能持續提升為民服務品質，活化組織機能，提供臺北市市民優質醫療保健服務，訂定「臺北市政府衛生局提升政府服務品質實施計畫」。民國 107 年衛生局依前揭計畫針對十二區健康服務中心及聯合醫院進行評核，並配合中華民國國家發展委員會及臺北市政府研究發展考核委員會修訂相關計畫，以督導所屬臺北市立聯合醫院及臺北市十二區健康服務中心據以執行，塑造為民服務之良好形象。

臺北市政府衛生局期所屬各機關能依循臺北市政府標準辦理公文書處理相關作業，以確保辦理時限及文書品質，為簡化公文處理成效檢核作業，二年分別採「全面檢核」及「複檢輔導」輪流交互運作方式辦理，民國 107 年公文處理成效檢核屬「全面檢核」，針對所屬臺北市十二區健康服務中心及臺北市立聯合醫院進行公文處理成效檢核作業，由衛生局綜合企劃科、秘書室與政風室共同組成「公文處理成效檢核小組」，至衛生局所屬各機關進行實地檢核工作（應受檢機關計 13 個），以評定各機關公文處理績效。

為利各項業務之稽核管考、追蹤進度，建置指標管理系統，民國 107 年計有 187 項指標，每月進行稽核並定期於臺北市政府衛生局主管會議提出報告及檢討，各業務單位均能適時針對進度落後（執行率未達 100%）之業務，提出檢討及改進策略，以期符合業務目標及民衆需求。

第二節 服務績效

臺北市政府衛生局多年來積極落實公共衛生三段五級之觀念，並將世界衛生組織渥太華憲章之行動綱領（制定健康的公共政策、創造有利健康的社會環境、強化社區的行動、強化個人能力、調整衛生醫療服務取向以達到健康促進的目的）融入各項業務，期以「臺北健康城市」為守護臺北市市民健康的目標，提供市民最佳服務，並與世界衛生體系接軌，邁向國際健康城市。





Chapter 4 Service Quality

Section 1 General Improvements in Service Quality

Upholding the commitments of creating excellent healthcare environment and improving the quality of medical services for the citizens of Taipei City, the Department has provided a variety of medical health services for the citizens, which covered preventive health care, tobacco hazards prevention, disease prevention, medical resource integration, the management of business area, pharmaceuticals, cosmetics and food sanitation, as well as the promotion of various health policies.

In order to constantly improve service quality, invigorate organizational functions, and provide Taipei City citizens with outstanding medical and health services, We have also established the “Implementation Plan to Improve Government Service Quality for Department of Health, Taipei City Government”. In 2018, the Department assessed the 12 district health centers and Taipei City Hospitals and contents of related plans were amended in coordination with the National Development Council and Taipei City Research, Development and Evaluation Commission for the supervision of Taipei City Hospitals and the 12 district health centers so as to create a positive image of serving citizens.

The Department and its affiliated institutions conduct official document related operations in accordance to the standards of Taipei City Government. In order to ensure the processing time and document quality, and to simplify the evaluation operation on official documents, “comprehensive evaluation” and “re-examining instruction” were conducted over the past two years. In 2018, a “comprehensive evaluation” was conducted on official document operations, targeting the official document operation efficacy of the 12 district health centers and Taipei City Hospital. A “Public Document Operation Efficacy Evaluation Team” was formed by the General Planning Division, Administrative Service Office, and Governmental Ethnic Office of the Department, and conducted on-site evaluation operations at each affiliated institution of the Department (including 13 examined institutions) to evaluate their operational performance on official document.

An indicator management system was established to audit, oversee, evaluate and track the progress of various tasks. In 2018, a total of 187 indicators were audited per month and regularly brought up and reviewed at the executive meeting of the Department. Each line unit could appropriately propose reviewing and improvement strategies to the tasks behind progress (below the implementation rate of 100%), in order to meet the task goals and the necessity of the citizens.

Section 2 Service Effectiveness

The Department has actively implemented a 3-Phase 5-Level concept for many years and integrated the WHO Ottawa Charter for Health Promotion in every service (such as stipulation of healthy public policies, creating a supportive environment, placing proper emphasis on community participation, enhancing personnel competences, and orienting health service directives to better achieve the objectives of health promotion) in order to create a “Healthy Taipei City”, safeguard the health of Taipei City citizens, provide them with the best services, and align the Department to global health systems to transform Taipei into a world-class healthy city.



第五章 醫療資訊網站及系統

第一節 公衛資訊系統改版

臺北市政府衛生局因應時代變遷需求及簡化使用者業務處理，於民國 106 年改版老人健康檢查、蚊媒傳染病防治資訊、精神病人照護系統，透過系統來精進業務單位及時資訊控管等，減輕系統使用者負擔，提升業務執行效率，107 年各系統正式上線成果如下所述。

一、蚊媒傳染病防治資訊系統

登革熱近年來成為台灣主要流行疾病之一，對蚊媒疫情的掌控與防治，早已成為刻不容緩之議題。有鑑於地理資訊系統在防疫領域的應用，已獲得肯定，可提升疫情防治效率及降低擴散風險。臺北市政府衛生局於民國 106 年為將原「傳染病資訊整合系統」改版為「蚊媒傳染病防治資訊系統」。新系統整合臺北市政府電子地圖、都市發展局航測影像、民政部門牌資訊、臺北市降雨淹水模擬圖、中央氣象局雨量、以及臺北市戶數人口數等 OPEN DATA。透過結合 MIS 與 GIS 各項功能，進行資料交叉比對及環境因子空間分析，提供重要決策圖資與風險管理，主要成果如下：

（一）業務執行效率大幅提升

系統提供使用者輸入地址後，系統可自動帶出行政區里。查詢個案，系統可自動呈現定位，並提供挑選個案點位。病媒蚊密度調查作業，系統除了可自動計算布氏及容器指數，亦可於繪製密調範圍後，自動計算戶數及人口數。鍵入群聚編號，系統即可提供群聚個案分布點位。

（二）資料處理更具彈性

系統定位功能除了輸入地址自動定位，亦可依需求手動定位。病媒蚊密度調查不僅提供繪製圓形，亦可描繪多邊形範圍，以符合實際街廓。密調範圍繪製後，可直接匯出門牌資訊。查詢功能除了可依行政區、里別、級數、日期、…等條件，針對查詢結果列表的資料還可進一步挑選與定位。噴消作業可配合政策提供予跨局處單位進行資料建檔。空間資料庫可發布圖資，分享給其他局處參考。

（三）預防監測資訊更多元

系統可動態時間序提供歷史疫情分析、風險因子圖層套疊分析、儀表板及圖表匯出圖檔。



▲ 蚊媒傳染病防治資訊系統

The mosquito-borne diseases control information system



Chapter 5 Medical Information Network and System

Section 1 Version Update to the Public Health Information System

In order to keep up with the change of time and simplify the handling of relevant user operations, the Department has updated various systems of public health information, such as the senior citizen health-checkup system, mosquito-borne diseases control information system and psychiatric patient care systems in 2017. Through update of these systems, we were able to help relevant units achieve real-time monitoring and control of relevant information, lighten the burden on system users and improve operational efficacy. These systems went online officially in 2018 and delivered the following results:

1. The mosquito-borne diseases control information system

Dengue fever has become one of the main infectious diseases in Taiwan in recent years. And as such, the control and prevention of mosquito-borne disease have become a critical issue that requires immediate action. In light of the effectiveness of geographic information system application in the field of disease prevention, the system has been deployed for improvement in disease prevention efficacy and reducing the likelihood of epidemic outbreak. The former “Infectious Disease Information Integrated System” was updated to become “Mosquito-borne Diseases Control Information System” by the Department in 2017. The new system uses many open data including the electronic map of Taipei City Government, aerial images of the Department of Urban Development, rainfall and flooding map of Taipei City, rainfall data from the Central Weather Bureau, Taipei City’s census data and so forth. Through the integration of relevant MIS and GIS features, the system enables cross comparison of selected data and spatial analysis of environmental factors to provide relevant graphic information for important decision-making processes and risk management with the following benefits:

(1) Substantial improvement in the implementation of relevant operations

When a user inputs an address, the system will automatically display the administrative district for the address. For case inquiries, the system automatically provides relevant positioning user to select the specific location. For vector mosquito density investigation, the system not only performs automatic calculation of the Breteau index and container index but also automatically calculates the number of households and population that might be exposed after determining the number of location investigations. By entering a group number, the system will provide the distribution of case studies for a specific group.

(2) Greater versatility in data processing

For the positioning function, in addition to automatic positioning by entering address, positioning can also be done manually if needed. In addition to the representation of vector mosquito density in circles, the system can also illustrate images in polygons to better match the actual street layout. Once density range has been determined, the system can directly export house number data. Apart from criteria such as administrative district, borough, severity level, date and so forth for the search function, users will also be able to further refine and position the results of a search. Sterilization by spraying can now be archived for inter-departmental/agency record keeping in accordance with pertinent policies. The spatial database can be used to generate and publish graphic information that other departments/agencies can use as a reference.

(3) Greater diversity in prevention and monitoring data

The system can now dynamically provide various information such as analysis of outbreak history, risk factor map overlay analysis, instrument panel and export of relevant images and tables in chronological order.



二、老人健康檢查系統

老人健康檢查系統提供醫院及臺北市政府衛生局管理者，彈性的健檢套餐設定，簡易的健檢資料處理機制，主要成果如下：

（一）完整的控制流程，管理作業更便利

針對衛生局與特約醫院，分別設計一套完整的控制流程，讓管理者能循序進行前置作業之各項設定，輕鬆完成後續之各項費用補助與審查作業。

（二）分層負責，權限控管更嚴密

系統提供簡易的管理機制，讓衛生局與特約醫院能夠藉由分層授權的方式，迅速依權責建立任務群組，並可隨時彈性調整指派人員及各項工作任務。

（三）資料批次上傳，提升健檢整體效益

透過一致性設計，逐步建立各項資料之批次上傳功能，將結果快速轉入至系統，節省建檔時間及減少人力成本。此系統亦提供身分檢核與剔退機制，讓健檢服務更周全。

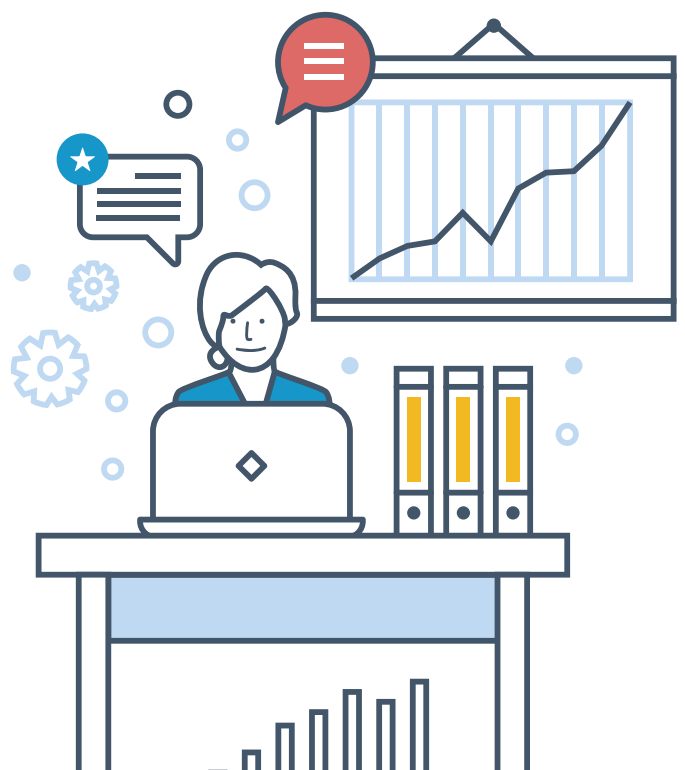
三、精神病人照護系統

臺北市政府衛生局於民國 106 年開始建置「精神病人照護系統」使用單位為局內心理衛生科及十二區健康服務中心人員，主要在提供精神病人社區照顧體系與個案管理業務如追蹤照護、陳情案件處理、系統登錄管考等。

為強化臺北市精神醫療機構強制作業與品質監控，衛生福利部精神照護資訊管理系統管理中的個案資料亦介接本系統，以利確認住院及出院準備程序能夠符合規定，協助相關照護人員直接於系統中進行資料查詢及衛生局所需之統計資料產出。

第二節 推動視覺化大數據分析平台

臺北市政府衛生局結合智慧科技與健康照護專業資源，建置健康照護資料交換平台及儀表板功能的大數據分析平台，串聯與整合各項衛生、社政、長照服務之資料，並利用視覺圖表化方式簡化繁雜的統計數據，提供彈性客製化報表，降低人力成本、資料蒐集、處理及等待時間，滿足業務需求也提升分析資料之精實管理能力。





2. Health Check-Up System for Senior Citizens

The revamped senior citizen health check-up system versatile configuration of physical examination sets and easy health check-up data processing mechanism for hospitals and administrators at the Department of Health by offering the following benefits:

(1) Comprehensive control processes to facilitate relevant management operations

Two separate, complete control processes have been designed for the Department of Health and contracted hospitals for administrators to go through relevant settings and configurations for specific preparatory operations so that relevant subsidizing and review processes that follow can be performed with greater ease.

(2) Tiered responsibility allocation for stricter privilege control

The system offers a simple management mechanism by enabling both the Department and contracted hospitals to assign privileges in a tiered structure and quickly set up specific task forces and groups in accordance with their privileges while allowing for versatile adjustments in personnel/task assignment.

(3) Batch upload for relevant data to improve overall efficacy for health check-up service

Through consistent design, we have gradually introduced batch upload function for different data types in order to achieve rapid data import into our systems to save time from filing and reduce human resource costs. In addition, the system also offers examinee identification and rejection functionalities to make our health check-up services more comprehensive.

3. Psychiatric patient care system

In 2017, the Department began its construction of the “Psychiatric patient care system” and identified the Mental Health Division and responsible personnel at the 12 district health centers across Taipei City to be the system’s primary users. The system has been established as the administrative system for psychiatric patient care in different communities for the handling of cases such as follow-up, petitions, system registration oversight and evaluation and so forth.

To strengthen various mandatory measures and quality monitoring of psychiatric institutions in Taipei City, the psychiatric patient care system has also been interfaced to the data of cases registered under the Management Information System of Psychiatric Care of the Ministry of Health and Welfare to ensure that relevant preparatory procedures for hospital check-in/out will be compliant by helping relevant caregivers to perform data query or obtain statistical data as requested by the Department directly via the system.

Section 2 Promotion of Analytic Platform for Visualized Big Data

By integrating existing smart technologies and resources in professional healthcare, the Department has constructed a big data analytic platform for healthcare data exchange along with instrument panel functions that is linked to relevant data and statistics on health, social policies and long-term care services. In addition to using visualized information as a way to simplify complicated statistical data, the platform also provides versatile report generation features to reduce personnel costs and the time required for data collection/processing/waiting. Apart from better accommodating our different operational needs, the platform also helps us refine our management capabilities in data analysis.



一、視覺化大數據分析平台

臺北市政府衛生局建置並推廣視覺化數據統計分析報表平台，搭配各項服務資料，提供業務同仁彈性取得視覺化統計圖表，如應用至公用管理入口網及食材登錄平台，客製化統計視覺化資料，提升分析資料之精實管理能力及報表易讀性，即時掌握最新資訊。



▲ 食材登錄平台
Food Tracer Taipei Platform

二、健康照護資料交換平台

臺北市政府衛生局資料交換平台所建置的資訊倉儲中心擁有自殺防治系統、行動個管系統、失智個管系統與精神照護系統，透過去個資化的處理，並搭配 Tableau 軟體，讓臺北市政府衛生局同仁可依業務需要，彈性組合出所需的報表與數據。

民國 107 年進行分析不同性別長者的慢性病或重大傷病罹患數、憂鬱情緒、失能程度、及照顧需求是否影響自殺行為發生；照顧者自殺行為發生是否因被照顧者失能程度、長照服務核准數、被照顧者情緒狀態、照顧者身心狀況（例如老老照顧、罹患慢性病或重大傷病或憂鬱狀態）或照顧負荷度而有不同；失智症患者失能程度是否影響自殺行為的發生等問題。藉由資料串接與勾稽可對個案進行更多瞭解，期望未來能依據結果，作為慢性病個案管理照護，擬定相關預防危險因子策略之參考，達成事先預防減少憾事發生機率。

未來預計串接不同資料庫如長照系統，期望能以大數據分析技巧得知長者發生自殺或失智之預測率，或慢性病個案併有自殺、失智情形或長照需求之現況，並作為爾後分析相關性之參考。

第三節 應用市府共用平台、網站行動化

臺北市政府衛生局網站採用鮮明色調、活潑圖案、豐富內容，以貼近民衆的使用習慣。各主題網站（包括高度近視防治網、窩溝封填防齲網、我的青春網、無菸健康網、失智症服務網、臺北健康城市、社區心理衛生中心、自殺防治中心等 8 個主題網站）於民國 107 年底應用市府共用平台，使用響應式網頁設計（RWD），架構符合無障礙網頁規範。衛生局網站係整合各醫療資源，提供民衆便捷的醫療訊息、健康資訊等專業知識，解決民衆對醫療保健方面的疑難雜症。



▲ 臺北市政府衛生局首頁
Department of Health, Taipei City
Government Homepage

網站瀏覽人次截至民國 108 年 3 月 11 日，共累計 13 萬 2,587 人次。



1. Analytic Platform for Visualized Big Data

The Department has constructed and promoted its platform for visualized data and statistical analytic report. Coupled with data obtained through relevant services, the platform offers a versatile way for employees to acquire visualized statistical data for applications such as the “Common Management Portal” and “Food Tracer Taipei Platform” by customizing relevant visualized data so that we refine our management capabilities in data analysis, improve readability for reports and monitor the latest information.

2. Healthcare data exchange platform

The Information Interchange constructed by the Department for its information exchange platform encompasses other systems such as the suicide prevention system, mobile case management system, dementia case management system and psychiatric care system. Through de-identification processes along with Tableau software, Department personnel will be able to obtain specific reports and statistics they might need for relevant operations.

In 2018, the Department used the platform to analyze a number of issues, such as the correlation between the number of elderly patients of both genders suffering from chronic disease/major disease or illnesses/depression, their extent of incapacitation, their need for care and suicidal behavior; the correlation between incidence of suicide for caregivers and factors such as the extent of incapacitation of elderly care recipients, approval status for long-term services, emotional status of care recipients, physical/mental status of caregivers (for elderly care or care recipients with chronic disease/major disease or illnesses/depression) and caregiver burden and whether the extent of incapacitation for dementia patients is correlated to suicidal behavior and so forth. Through data concatenation and articulation, one would be able to gain better understanding of relevant cases and hopefully we will be able to use these results as a reference in our formulation of preventive strategies for corresponding risk factors in the management of chronic disease cases to achieve preemptive prevention of suicide.

In the future, we plan to concatenate the platform to other databases such as the long-term care system so that we will be able to make informed prediction of suicide/dementia for senior citizens through big data analytics and monitor the current status of chronic illness patients with risks of suicide/dementia or those who might require long-term care as reference for relevant analyses in the future.

Section 3 Application of Taipei City Government's Common Platform and Mobile Version of Relevant Websites

The Department's website has been designed specifically with bright colors, lively pictures and rich contents in order to accommodate citizens' habit of use and browsing. All thematic websites (the 8 sites including serious myopia prevention site, pit and fissure sealant for dental caries prevention, my youth web, no smoking web, dementia service web, Healthy Taipei City, Taipei community mental health center and suicide prevention center) have been featured on Taipei City Government's Common Platform with Responsive Web Design (RWD) elements, with full compliance to the “Accessible Website Development Guidelines”. The website of the Department integrates various medical resources to provide citizens with convenient medical information, health information and related professional knowledge to address citizens' questions and inquiries regarding medical and health issues.

A total of 132,587 citizens have visited the website as of March 11, 2019.

第二篇 強化 食品安全

2

Enhance Food Safety





第二篇 強化食品安全

第一章 提升民衆對食藥粧安全的信賴

第一節 食安週食安有感

為營造「食安有感」政策氛圍，臺北市政府衛生局民國 107 年 3 月 12 日至 4 月 15 日辦理「食品安全週」，延續 106 年食安週於 3 月份集中公告「食品安全自治條例」，並透過食安條例「市民參與」、「安心外食」、「資訊透明」3 大章節，推出食安新政策，並透過跨局處及跨處室整合共創多贏局面，打破分工不合作的刻板印象。

一、食安西遊記園遊會：

依臺北市食安條例「市民參與」、「資訊透明」及「安心外食」3 大面向，聯合臺北市政府負責食安工作的局處夥伴與市民互動，臺北市政府衛生局宣導西式外燴要報備等重點政策，教育局推廣校園食安把關、環保局推廣廚餘減量、臺北市市場處宣導夜市食安輔導成果，並結合西式外燴業者、本土食品業者，聯合產官學界推廣食安工作成果。

二、共餐據點，食安把關：

臺北市共餐據點分為 2 大供餐型態，由自設廚房或自助餐、便當、中央廚房供應，為確保據點食安品質，確保零食品中毒發生，民國 107 年度臺北市政府衛生局指派專人到點服務，透過據點自主報名及篩選供餐量大之 150 個據點，針對「食材來源」、「製作環境」、「人員衛生」及「設備器材」等四大面向，輔導食品安全衛生觀念，讓共餐者可以更安心的共享美味料理並提升臺北市共餐據點食品衛生安全。



▲ 輔導共餐據點 為食安把關
Supervise the joint meal sites Ensure food safety of joint meal sites

Part 2 Enhance Food Safety

Chapter 1 Increasing Public Confidence in Food, Drugs and Cosmetics Safety

Section 1 Food Safety Week

In an effort to emphasize the Department's commitment to boost public confidence in food safety, the Department has launched the "Food Safety Week" series of activities between March 12 through April 15, 2018 as a continuation to the featured dissemination of "Taipei City Self-Governing Regulations for Food Safety" that took place in March 2017. Pursuant to the sections on "Citizen participation", "Safe catering" and "Information transparency" in the Food Safety Ordinance, the Department has not only implemented new policies but also collaborated with other departments and agencies to achieve greater synergy in our attempt to break the stereotypical image that government agencies rarely work in coordination.

1. Food Safety Fair:

Referring to the specific contents laid out in three major aspects of "Citizen participation", "Safe catering" and "Information transparency" in the Food Safety Ordinance, the event served as an opportunity for personnel responsible for food safety from Taipei City Government to interact with citizens whilst the Department announced key policies on the reporting for western-styled catering services. At the fair, our colleagues from the Department of Education promoted the importance of food safety monitoring at schools; the Department of Environmental Protection advocated for the reduction of kitchen waste and the Market Administration Office presented the results on night market food safety supervision. Not only that, we have also called on catering service providers and local food manufacturers to come together and showcase our achievements thus far in the area of food safety promotion.



▲ 食安西遊記園遊會
Food Safety Fair

2. Food safety monitoring at joint meal sites:

Joint meal sites for senior in Taipei City serve meals in two ways: food prepared at temporary kitchens or catered as self-service food/served as lunch boxes or prepared collectively at a central kitchen. In 2018, to ensure the safety and quality of food served at such locations and prevent food poisoning, the Department has dispatched designated personnel at 150 locations of voluntary registration and those that serve significant quantities of food to disseminate the concepts of food safety and hygiene in the aspects of "food source", "preparation environment", "personnel hygiene" and "equipment used", so that citizens will be able to enjoy their meals with greater confidence with enhanced food hygiene and safety in Taipei City at these locations.



三、 食品安全微笑標章守護夜市食安：

為食安把關，臺北市食品安全衛生分級認證從餐廳延伸至夜市，全國首創夜市專屬的「食品安全微笑標章」，優先輔導「士林市場、寧夏夜市及華西街夜市」等 3 處國際觀光夜市「人員衛生、製作環境衛生、食材溯源追蹤及病媒防治」等 4 大面向，頒發食安微笑金質或銀質標章及感謝狀予 3 處夜市自治會。



▲ 夜市食安微笑標章—「金質獎」、「銀質獎」
The food safety smile certification gold and silver quality awards for night market

四、 食藥粧網路地圖再升級，食安資訊e點通：

推出「食藥粧網路地圖 2.0」，網站升級改版，強化搜尋功能，增闢「通勤族美食（包含捷運站、台鐵站、高鐵站）」、「商圈美食」、「百貨美食」搜尋模式，可查詢到周圍餐飲業者衛生稽查結果，另提升與民衆的互動性，增加留言版功能，民衆可給予業者評價，共同把關食安！



▲ 臺北市食藥粧網路地圖推出「臺北市食安資訊入口網」園遊會
iMAP (the Food and Drug Inspection Map Taipei) Presents "Taipei City Food Safety Portal Website" Fair

五、 推動食安消爭調解庭：

保障食安消費權益，委託臺北市民間團體建立調解專家群，協助消費者與廠商面對面協商食安第 1 次消費爭議，化解雙方歧見、達成共識，創造雙贏局面。



▲ 推動食安消爭調解庭
Promote food safety dispute tribunal

第二節 餐飲衛生管理分級再升級

鑑於民衆食品安全意識抬頭，外食人口逐漸增多，為使臺北市市民吃得安心，並回應民衆期待，臺北市政府衛生局即依循市政白皮書「食安·10 安」及「安心外食」之施政目標，鎖定外食族飲食安全，並遵循衛生福利部食品藥物管理署訂定之「餐飲衛生管理分級評核制度」，針對臺北市餐飲業者進行「優級」與「良級」分級評核，藉以提升臺北市餐飲衛生安全，並提供消費者選擇參考。

自民國 104 年起，臺北市政府衛生局即依循衛生福利部食品藥物管理署規劃之「餐飲衛生管理分級評核制度辦理注意事項」，規劃臺北市餐飲衛生管理分級制度。期望藉由確實執行餐飲衛生管理分級評核，將外食族及學校午餐、上班族外食便當列為優先施政重點，加強要求供應商提升品質衛生，保障學生與上班族吃的安心。



3. Safeguarding food safety at night markets with the Food Safety Smile Certification:

In an effort to ensure food safety, Taipei City's food safety and hygiene rating system has been extended from restaurants to night markets as the Department introduced the "Food Safety Smile Certification" - the first label specifically intended for night markets. We prioritized the three major international tourism night markets of "Shilin Market, Ningxia Night Market and Huaxi Street Night Market" by focusing on four aspects of "Personnel hygiene, preparation environment hygiene, food ingredient traceability and vector prevention" by awarding Gold/Silver Food Safety Certification and appreciation to the three independent associations for the night markets based on their performance and compliance.

4. Upgrade to the Taipei Food and Drug Inspection Map with improved access to food safety information:

The Department launched the "Taipei Food and Drug Inspection Map 2.0" with an overhaul of the website and improved search function by adding the "Food Recommendations for Commuters (including MRT, TRA Station and THSR Stations)", and new search modes for "Food Recommendations in Business Districts" and "Departmental Store Food Recommendations" for users to find the result of hygiene inspections of relevant food and beverage service providers in their surrounding areas. In addition, a message board has also been added to facilitate interaction with citizens, who can now use the feature to rate specific proprietors and contribute to the cause of food safety protection!

5. Promotion of food safety dispute tribunal:

As one of many ways to safeguard consumers' rights in the area of food safety, the Department has commissioned private organizations in Taipei City to assemble a task force of mediation experts to assist consumers and food manufacturers/providers to resolve first food safety disputes in a face-to-face setting to help resolve the differences in perspectives between the two parties and reach consensus for win-win.

Section 2 Stepping Up Food Sanitation Management and Grading

Given that the food safety awareness of the people has raised and that there were an increasing amount of people who dine out, the Department followed the "10 Food Safety" and "Safe Eating Out" administration targets mentioned in the Taipei City White Book for Taipei City citizens to eat at ease and respond to their expectations. Targeting the food safety of people who dine out and following the "Food Sanitation Management Grading Assessment System" promulgated by the Food and Drug Administration, Ministry of Health and Welfare, grading assessment was conducted on Taipei City catering businesses, which were given a grade of either "Excellent" or "Good", to improve the food sanitation and safety of Taipei City and provide alternatives for consumers.

Starting from 2015, the Department has followed the "Precautions on Handling Food Sanitation Management Grading Assessment System" stipulated by the Food and Drug Administration, Ministry of Health and Welfare in organizing the food sanitation management grading system of Taipei City. By doing so, the Department expected to thoroughly implement the food sanitation management grading system of Taipei City. In response to the content of the White Book, people who dine out and the food boxes of campus lunches and workers that eat out were first priority. The Department has urged dealers to improve their food quality to ensure that students and workers can eat safely.



第二篇 強化食品安全

臺北市餐飲衛生管理分級評核制度採先輔導後評核方式辦理，民國 107 年度專家座談會議召開 1 場，輔導評核人員共識會辦理 2 場，強制業別（連鎖自助餐業者、高中職熱食部業者）參加餐飲分級業者說明會共 2 場，輔導評核業者說明會共 10 場，業者共 741 人參與。

民國 107 年完成輔導評核 696 家業者，評核通過 656 家（優級 617 家、良級 39 家），未取得認證 40 家，通過率 94.3%，

追蹤評核 104 年度原認證業者通過 109 家（優 65 家、良 44 家），並於民國 107 年 10 月 9 日辦理「優良把關 幸福食安」授證成果發表會，頒發通過評核業者獎狀及標章貼紙，並吸引更多符合資格之餐飲業者未來能共同響應，為臺北市市民外食把關。

民國 104 年至 107 年評核 2,414 家業者，評核通過計 2,229 家（優級 1,803 家、良級 426 家），未通過 185 家，通過率 92.3%，達到 4 年目標 2,000 家餐飲業者通過評核，未來將持續努力，以維護民衆外食安全之目標。

藉由餐飲衛生管理分級評核制度之施行，可提升業者衛生自主管理的能力，使餐飲業之食品衛生安全更趨完善，並藉由臺北市政府衛生局衛生稽查科之追蹤評核，有效監督業者，以延緩標章公信力。通過評核業者之名單彙整回報衛生福利部食品藥物管理署協助轉知各縣市，增加業者之競爭力。民衆亦可以藉由餐飲衛生管理分級評核制度，選擇衛生優良且衛生安全之店家，可充分享受安全的消費環境。



▲ 餐飲衛生管理分級一優良標章

Food Sanitation Management and Grading Excellence Mark



▲ 臺北市餐飲衛生管理分級成果發表會

Taipei City Food Hygiene Management Classification Results Presentation



In implementing the food sanitation management grading system of Taipei City, instructions are given to the catering businesses before assessments are conducted. In 2018, the Department held 1 expert forum, 2 instructing and assessment staff consensus meetings, 2 information sessions for businesses with compulsory participation (franchise self-service food dealers and hot food provider in senior high/vocational schools) in the grading, and 10 information sessions for participating businesses. A total of 741 participants from relevant businesses attended these meetings.

In 2018, 696 businesses completed their assessment, in which 656 of them passed the assessment (617 “Excellent” businesses and 39 “Good” businesses) and 40 did not. The passing rate was 94.3%. In a follow-up assessment of the businesses that passed the assessment in 2015, a total of 109 (65 rated as “excellent” and 44 rated as “good”) had passed the new assessment. On October 9, 2018, the “Outstanding Vanguard of Food Safety” certificate presentation ceremony and result presentation was held to award the businesses with their certificate of merit and label. Hopefully the event would attract more food and beverage service providers that are compliant to take part in the cause to promote safety of food catering in the future.

From 2015 to 2018, 2,414 businesses completed their assessment, in which 2,229 of them passed the assessment (1,803 “Excellent” businesses and 426 “Good” businesses) and 185 did not. The passing rate was 92.3%. The Department’s goal is to have 2,000 food and beverage service providers included in the system and passing the assessment in 4 years and we will continue to work hard in order to achieve our goal of maintaining the safety of food catering for citizens.

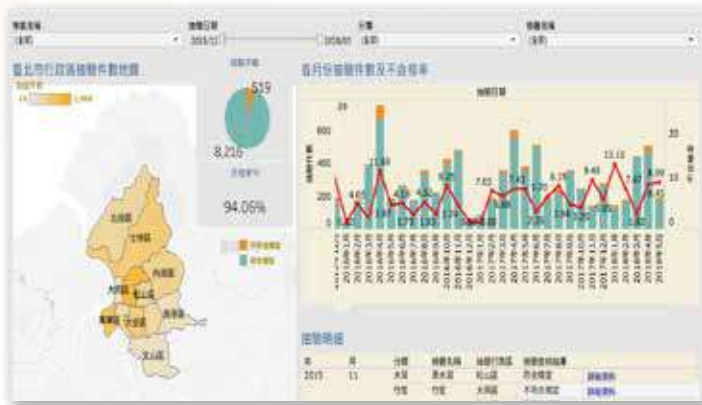
The implementation of food sanitation management grading and assessment system helps proprietors to improve their self-management capability for sanitation, thereby further enhancing food sanitation and safety of the catering industry while allowing the Department to conduct follow-up assessments and effectively monitor the businesses to extend the credibility of the label. The list of businesses that have passed the assessment will be sorted and reported to the Food and Drug Administration, Ministry of Health and Welfare to further notify other local governments in order to enhance the competitiveness of the businesses. Citizens will also be able to select businesses with outstanding hygiene and food safety in order to enjoy a safe consumer environment through the Food Sanitation Management Grading Assessment System.





第三節 食材登錄平台全都露

臺北市政府衛生局民國 107 年辦理 2 場教育訓練及 1 場說明會，共計 38 人次出席，全程溝通順利，業者均表示可配合政策執行完整登錄食材登錄平台，衛生局依據臺北市食品安全自治條例第 7 條規定，107 年 11 月 28 日以北市衛食藥字第 10760471731 號預告公告 5 處



▲ 臺北市食材登錄平台—抽驗專區
Food Tracer Taipei Platform - Sampling Zone

門市以上連鎖早餐業，並於 107 年 8 月 29 日平台成果發表會公布 13 家品牌 396 處門市早餐店正式上線，揭露 428 項產品、1,744 項食材資訊。107 年 12 月 5 日以北市衛食藥字第 10760471781 號公告「臺北市市場處列管夜間營業之臨時攤販集中場之飲食類有證及列管攤販」（14 個夜市逾 748 家攤商），揭露 4,601 項食材資訊，並擴大提供食安資訊透明化，納入機關例行性抽驗計畫，加碼提供視覺化整合性報表，並多元精進專區搜尋功能及後台智慧監控主動通知平台登錄欄位缺失，進行即時補正、提供多元的搜尋功能，並設置專人專線輔導業者登錄，即時協助輔導業者完整登錄，共同維護食安。

第四節 淨化食藥粧廣告

臺北市政府衛生局統計民國 107 年違規廣告查緝成果，違規廣告查核 3,324 件，食品、藥物及化粧品違規廣告共開罰 1,459 件，統計分析：以食品類 529 件，裁罰 3,347 萬元（43.9%）居首，其次是化粧品 876 件，裁罰 2,800 萬 5,000 元（36.7%）居次，藥物廣告 54 件，裁罰 1,483 萬（19.4%）；違規媒體以網路 666 件（45.6%）最多，電視 487 件（33.4%）居第 2，其次為雜誌、報紙 215 件（14.7%）、宣傳物（立牌、看板等）45 件（3.1%）。

為維護消費者權益，臺北市衛生局持續監錄、稽查違規廣告，經調查屬實，依法裁罰以遏止不法。





Section 3 Full Disclosure on Food Tracer Taipei Platform

The Department held 2 sessions of educational training and 1 presentations with a total of 38 participants in 2018. The communication was conducted smoothly and all the suppliers agreed to register on the Food Tracer Taipei Platform. Pursuant to Article 7 of the “Taipei City Self-Governing Regulations for Food Safety”, the Department announced the registration of franchise breakfast establishments with more than 5 stores by official document of Taipei-Wei-Shi-Yao-Zi No.10760471731 on November 28, 2018 and officially revealing the 396 breakfast establishments operated by 13 franchises during the platform presentation earlier on August 29, 2018 to disclose the information on a total of 428 products and 1,744 food ingredients. By official document of Taipei Wei-Shi-Yao-Zi No.10760471781 dated December 5, 2018 on “licensed food stall vendors in the open-air markets operating in the night and managed by Taipei City Market Administration Office” (applicable to 14 night markets and more than 748 vendors), the Department has disclosed information on a total of 4,601 food ingredients while expanding the scale of food safety information transparency, introducing routine sampling inspection mechanism and compilation of visualized integrated report along with diverse sections with search features and rear-end smart monitoring and active reporting for oversight registration. These features allow for immediate rectification and diverse search functionalities. The Department has also designated responsible personnel to help and walk proprietors through the entire registration process.

Section 4 Management of Advertisements for Food, Drugs, and Cosmetics

Here is a summary of illegal advertisements in 2018 that the Department has investigated: 3,324 cases of illegal advertisements for food, drug and cosmetics have detected, furthermore, 1,459 cases were penalized. The statistical breakdown is as follows: 529 violations for food advertisement with a total fine of NT\$ 33.47 million (43.9%), followed by 876 violations for cosmetics advertisement, with a total fine of NT\$ 28.005 million (36.7%) and 54 violations for drug commercials, with a fine of NT\$ 14.83 million (19.4%). In terms of the media of broadcasting, the Internet stood out at 1st place with 666 violations (45.6%), followed by TV at 487 violations (33.4%), magazines/newspapers at 215 violations (14.7%) and promotional materials (such as signage advertisement board, etc.) at 45 violations (3.1%).

The Department will continuously monitor and inspect illegal advertisements, and will impose fines on the cases that have been proved illegal to prevent violations and protect the rights and interests of the consumers.



▲ 107 年傳播媒體業者講習
2018 Media Practitioner Lecture



第二章 維護食藥粧安全資訊消費環境

第一節 食藥粧專案查驗成果

- 一、針對各類食品（含節慶及高風險產品）主動稽查及訂定相關稽查輔導與專案抽驗計畫，擬定監測至少 3,600 件市售食品，除了擴充檢驗單位能量，以縮短檢驗時程，另機動調整抽樣時機，即時攔截不合格產品。民國 107 年查驗市售食品、食品容器具等計 4,796 件，合格 4,522 件（合格率 94.3%）。如發現有不符規定者，除立即命販售業者下架不得販售外，並通知轄區縣市衛生局進行產品後續追查與查處，以利源頭管理及防範不合格產品在市面上流通，同時將抽驗結果即時發布新聞並宣導業者及消費者正確食品衛生觀念，107 年共計發布 71 則食品抽驗結果新聞，並將不合格業者列入年度重點稽查對象，不定期追蹤查驗。
- 二、民國 107 年度食品標示共檢查 7 萬 1,194 件產品（包裝食品 6 萬 9,281 件、散裝食品 1,878 件，食品添加物 35 件），查獲 407 件違規產品，處分 153 件，不合格率為 0.57%。分析產品標示違規原因前 5 項，不合格率以「營養標示格式不符規定（28.99%）」占最高，其次依序為「內容物（16%）」、「有效日期（14%）」、「廠商資訊（13.02%）」、「原產地（11.3%）」、「涉及不實、誇張或易生誤解（8.85%）」及「品名（2.7%）」。
臺北市政府衛生局 106 年 1 月 1 日至 107 年 12 月 31 日止，共計辦理 85 場食品標示說明會總計 4,612 家業者（實體 3,457 家、線上 793 家、實地輔導 362 家）參與說明會。輔導臺北市製造、加工業及輸入業之食品業者使其瞭解「食品標示」之意義及對其之效益。衛生局於 107 年 1 月至 12 月間針對民衆所關心之臺北市公共飲食場所（含一般餐廳、外燴飲食業、自助餐飲業、宴席餐廳…等）、食品販賣業（含超市、大賣場、超商…等）、製造業、食品工廠（含乳品、肉及加工品、蛋及加工品、水產及加工品…等）、物流業及醫事照護機構（如醫療院所）等民生相關之食品業者進行衛生稽查與輔導，替臺北市市民把關食品安全衛生成效頗豐，107 年衛生稽查與輔導臺北市食品業者總計為 2 萬 6,471 家，其中輔導改善 3,799 家，限期改善 3,527 家，均複查完成。



Chapter 2 Maintenance of a Safe and Informed Consumer Environment for Food, Drugs, and Cosmetics

Section 1 Inspection Results of Food, Drugs, and Cosmetics

1. Active audits, audit counseling and random inspection programs were established for various food products (including festive foods and high risk products), and plans were made to monitor at least 3,600 food products sold on the market. In addition to expanding the capacity of inspecting agencies, efforts were also made to shorten the inspection cycle time. Sampling schedules were also flexibly adjusted to intercept unqualified products in a timely manner. In 2018, a total of 4,796 foods and food containers sold on the market were inspected, of these 4,522 were found to be compliant (with a compliance rate of 94.3%). Sales of products found to be non-conforming shall be prohibited, and retailers shall be ordered to immediately remove the said products from their shelves. The district health centers shall also be notified to conduct subsequent follow-up checks, inspections and disposal of the said non-conforming products to facilitate source management and prevent the said products from entering market circulation. Press release articles on the outcomes of the sampling inspection shall also be released in a timely manner while proper food sanitation concepts were promoted among both business owners and consumers. In 2018, a total of 71 press articles on the outcomes of food sampling and inspection were released. Unqualified businesses were listed as key audit targets and were subjected to unannounced follow-up inspections.
2. In 2018, the Department inspected a total of 71,194 food products for their labels (69,281 packaged foods, 1,878 bulked foods and 35 food additives) and 407 violations were found. Among the violations, penalties have been imposed on 153 cases with a nonconforming rate of 0.57%. From the analysis of the top 5 reasons for the product labeling violations, noncompliance in nutrition labeling came first (at 28.99%), followed by contents (16%), expiry date (14%), manufacturer information (13.02%), place of manufacturing (11.3%), incorrect/exaggerated/misleading labels (8.85%) and product name (2.7%). Between January 1, 2017 through December 31, 2018, the Department had held 85 food labeling presentations for a total of 4,612 proprietors (3,457 dealers in physical sessions and 793 dealers in online sessions and 362 through on-site assistance). The Department also helps food dealers in the manufacturing, processing, and importing fields in Taipei City understand the meaning of the “food labeling” and the benefits to them. In 2018, the Department conducted sanitation auditing and guidance on Taipei City public food venues (including restaurants, catering providers, self-service diners, banquet restaurants, etc.), food distributors (including supermarkets, hypermarkets, convenience stores, etc.), the manufacturing industry, food factories (including milk, meat and processed products, eggs and processed products, sea food and processed products, etc.), logistics and medical and care institutions (such as hospitals, clinics, etc.) and other related food providers that citizens are concerned with. The sanitation auditing and guidance were conducted on 26,471 establishments/businesses in 2018 and among them, 3,799 dealers were instructed for improvement while 3,527 dealers were asked to make rectifications before a deadline. Follow-up auditing on these establishments have all been completed.



三、加強監測藥物品質，抽驗市售藥物及膠囊錠狀食品共計 203 件，查獲不合格件數共 56 件、市售藥物包裝標示檢查共計 1 萬 728 件，不符規定 38 件；針對公園、寺廟及菜市場、檳榔攤、雜貨店、工地及彩券行等非正規場所進行販賣不法藥物及含酒精類產品稽查，共計 5,703 家次；進行管制藥品例行性查核，共計 3,120 件；另外，也密切聯繫檢、警、調單位，執行不法藥物的查緝工作，查獲偽、劣、禁藥共計 140 件、不良及不法醫療器材共計 37 件。

四、抽驗市售化粧品產品共計 168 件，檢驗不符規定 12 件。檢查市售化粧品包裝標示，共 1 萬 1,225 件，不符規定 237 件（含臺北市政府衛生局及外縣市移入案件）。

五、針對市面化粧品販售地點進行稽查抽驗：

- （一）染髮劑化粧品抽驗：共送驗 15 件，2 件檢驗結果不符合規定，標示檢查不符規定 3 件。
- （二）防曬劑化粧品抽驗：共送驗 15 件，檢驗結果皆符合規定，標示檢查不符規定 7 件。
- （三）雌激素化粧品稽查：共抽驗 15 件產品，檢驗結果皆符合規定，標示檢查不符規定 5 件。
- （四）指甲油化粧品抽驗：共抽驗 15 件產品，檢驗結果皆符合規定，標示檢查不符規定 2 件。

第二節 食安自治條例推動成果

《臺北市食品安全自治條例》共計 5 章 20 條，考量臺北市食品產業規模及特性，其中需另行公告始實施之條文共計 7 條（第 7 條、第 9 條、第 11 條、第 12 條、第 14 條、第 15 條及第 16 條），臺北市政府衛生局推動並落實「臺北市食品安全自治條例綱要計畫」，積極辦理講習、座談暨公聽會，民國 107 年 1 至 12 月總計召開 242 場次食品業者衛生講習及說明會，計有 1 萬 873 人參與。並於臺北市政府食品安全委員會設立議題，蒐集產、官、學界各

方意見，取得共識辦理公告。自食安條例公告施行迄今已完成上述 7 條文共 31 項新政策公告，並依《食品安全衛生管理法》及《臺北市食品安全自治條例》及公告內容執行食品衛生管理工作。



▲ 食安新政策 打造安心外食環境
Food Safety New Policy Creates Worry-free Dining Environment



3. Drug quality is strictly monitored, with a total of 203 drugs sold on the market as well as food in capsule or tablet forms being sampled and tested. A total of 56 non-conforming products were found. A total of 10,728 drug packaging labels were inspected, of these 38 were found to be non-conforming. Audits were conducted on the sale of illegal drugs and alcohol-containing products at a total of 5,703 unqualified venues that included parks, temples, grocery markets, betel nut stands, grocery stores, construction sites and lottery shops. A total of 3,120 cases of routine inspection of controlled drugs were carried out. The Department also maintained close communication with the police as well as investigation and prosecution authorities to conduct inspections of illegal drugs. A total of 140 cases of counterfeit, inferior, or prohibited drugs as well as 37 cases of inferior and illegal medical devices were identified.
4. A total of 168 cosmetics sold on the market were randomly sampled and tested. A total of 12 were found to be non-conforming. A total of 11,225 labels of cosmetic products sold on the market were inspected, of these 237 non-conformities were found (including cases referred by the Department of Health, Taipei City Government and cases transferred from other counties and cities).
5. Audits and random sampling and testing of retail locations of cosmetics:
 - (1) Random sampling and testing on hair dye: 15 products were tested and the test results showed 2 products to be noncompliant and 3 products failing to meet product labeling regulations.
 - (2) Random sampling and testing on sunscreen cosmetics: 15 products were tested and the test results showed all to be compliant, with 7 products failing to meet product labeling regulations.
 - (3) Audit for cosmetics with estrogen: 15 products were tested and the test results showed that all to be compliant, with 5 products failing to meet product labeling regulations.
 - (4) Random sampling and test on nail polish cosmetics 15 products were tested and the test results showed that all to be compliant, with 2 products failing to meet product labeling regulations.

Section 2 Promotion Effectiveness of Taipei City Self-Governing Regulations for Food Safety

“Taipei City Self-Governing Regulations for Food Safety” contains 5 chapters and 20 provisions. Inconsideration of the scale and feature of the food industry in Taipei City, 7 of the 20 provisions (Articles 7, 9, 11, 12, 14, 15 and 16) must be promulgated separately to bring them into force. To promote and implement the “Master Plan of Taipei City Self-Governing Regulations for Food Safety”, the Department has held many workshops, discussion meetings and hearings, including 242 sessions of workshops and presentations held for food dealers from January to December 2018. A total of 10,873 dealers participated in these activities. The Department set agendas for Taipei City Government Food Safety Committee. It gathered suggestions from the industries, Government and academics, reached the consensus, and made announcement. 7 articles and 31 new policies have been announced since promulgation and enforcement of the “Taipei City Self-Governing Regulations for Food Safety”. The Department carries out food sanitation management pursuant to the “Act Governing Food Safety and Sanitation”, “Taipei City Self-Governing Regulations for Food Safety”, and the contents of the announcements.



一、第 7 條食材登錄平台：

《臺北市食品安全自治條例》自公告施行以來，完成該條例第 7 條共 8 項預公告及公告，繼民國 105 年納管臺北市設有 5 處門市以上之連鎖飲冰品業者、2 處門市以上之連鎖超市、超商、大賣場業者及各級政府機關員工餐廳應強制登錄，107 年 11 月 28 日以北市衛食藥字第 10760471731 號預公告 5 處門市以上連鎖早餐業，並已於 107 年 8 月 29 日平台成果發表會公布 13 家品牌 396 處門市早餐店正式上線，揭露 428 項產品、1,744 項食材資訊。107 年 12 月 5 日以北市衛食藥字第 10760471781 號公告「臺北市市場處列管夜間營業之臨時攤販集中場之飲食類有證及列管攤販」（14 個夜市逾 748 家攤商），揭露 4,601 項食材資訊。

二、第 9 條公共飲食場所及散裝食品標示：

臺北市政府衛生局於民國 105 年 8 月 5 日北市衛食藥字第 10537926700 號公告「具營業登記之連鎖火鍋業者供應持續加熱火鍋類產品，應於供應場所以中文顯著標示接觸或盛裝之非一次性餐具原產地、材質及耐熱溫度」。再於 106 年 11 月 27 日以北市衛食藥字第 10646950500 號公告「臺北市商圈食品販售業者，年貨大街期間販售散裝及加工年節食品，應標示品名、原產地及補貨日期。」，107 年 2 月 1 日至 14 日年貨大街期間依公告內容執行標示輔導稽查作業，共計查核 3,509 家次，4 萬 305 件散裝食品標示，均符合規定。

三、第 11 條餐飲衛生管理分級：

臺北市政府衛生局為使市民安心外食，民國 107 年 6 月 12 日召開「臺北市連鎖自助餐業者」說明會及 107 年 7 月 9 日召開「臺北市高中職學校設有廚房、熱食供應場所或受委託至前開場所辦理餐點供應者」說明會，現場業者皆無反對意見，遂於 107 年 3 月 15 日、8 月 3 日及 9 月 26 日分別公告「臺北市 20 桌以上中式筵席餐廳、連鎖自助餐業者、高中職熱食部業者」應申請餐飲衛生管理分級評核認證標章。107 年共計公告臺北市觀光飯店、一般旅館、食品餐盒工廠、連鎖賣場之即食熟食區及其商店街餐飲業者、20 桌以上中式筵席業者、連鎖自助餐業者、高中職熱食部業者應申請餐飲衛生管理分級評核認證標章，截至 107 年底計有 2,229 家優良業者通過評核（優級 1,803 家、良級 426 家）。





1. Article 7 Food Tracer Taipei Platform:

8 pre-announcements and announcements pursuant to Article 7 of the “Taipei City Self-Governing Regulations for Food Safety” have been completed since its promulgation. In 2016, registered franchise operating 5 or more establishments in the beverage and ice dessert industries and franchise convenience stores/supermarkets/hyper markets with at least 2 stores and employee cafeteria operators at government units are now required to be registered on the Food Tracer Taipei Platform. The Department made a pre-announcement for the registration of franchise breakfast restaurants operating 5 or more establishments by Letter of Taipei-Wei-Shi-Yao-Zi No.10760471731 on November 28, 2018. During the platform result presentation on August 29, 2018, a total of 396 breakfast establishments operated by 13 franchises were revealed with the disclosure of information on 428 products and 1,744 food ingredients. By official document of Taipei Wei-Shi-Yao-Zi No.10760471781 dated December 5, 2018 on “licensed food stall vendors in the open-air markets operating in the night and managed by Taipei City Market Administration Office” (applicable to 14 night markets and more than 748 vendors), the Department has disclosed information on a total of 4,601 food ingredients.

2. Article 9 Public food venues and bulk foods labeling:

The Department announced by official document of Taipei-Wei-Shi-Yao-Zi No.10537926700 on August 5, 2016: “When chain hot pot owners with business registration certificates provide constantly heated hot pot products, owners must clearly label in Mandarin the origins, materials and heat-resistance temperature of the non-disposable utensils which contacts or are contains food at the supply place”. In addition, the Department announced by official document of Taipei-Wei-Shi-Yao-Zi No.10646950500 on November 27, 2017 that the “food dealers in any shopping area of the Taipei City shall mark the item name, country of origin and replenishment date on the bulk and processed food that they sell during the Chinese New Year Market period”. The inspection and guidance were conducted during the Chinese New Year Market from February 1, 2018 to February 14, 2018 according to the announcement. 3,509 dealers and 40,305 labels were inspected and all of them complied with the regulations.

3. Article 11 of Food Sanitation Management and Grading:

In an effort to enable citizens to eat out without having to worry about food safety, the Department held a presentation on June 12, 2018 on “Franchise self-service food establishments in Taipei City” and another session for “Senior/vocational high school with kitchen/cooked food canteen and food providers commissioned to cater meals at these locations in Taipei City” on July 9, 2018, with no objections made during both presentations. On March 15, August 3 and September 26, 2018, the announcements for Chinese banquet restaurants with more than 20 tables, franchise self-service food establishments and senior/vocational high school food providers respectively to apply for their Food Sanitation Management and Grading certification label. In 2018, announcements have been made for tourism hotels, standard hotels, food/lunchbox factories, areas of ready-to-eat food in chain stores and catering businesses in the shopping strips of chain stores, Chinese banquet restaurants with more than 20 tables, franchise self-service food establishments and senior/vocational high school food providers to apply for their Food Sanitation Management and Grading certification label. As of the end of 2018, a total of 2,229 businesses have passed the assessment (1,803 with excellent rating and 426 with good rating).



四、第 12 條定期檢查過期食品及分區管理：

繼民國 105 年 11 月 17 日以北市衛食藥字第 10539975000 號及 106 年 3 月 14 日以北市衛食藥字第 10631629400 號納管連鎖超市、超商、大賣場業者及觀光旅館附屬或委託經營之餐飲部門定期檢查過期食品及分區管理。臺北市政府衛生局並於 107 年 2 月 12 日起至 2 月 26 日執行「連鎖超市、超商於臺北市之餐飲部門之販售區及庫存區管理專案」，共計抽查 45 家連鎖超市、超商業者，均符合上述規定；於 107 年 2 月 22 日起至 107 年 3 月 16 日執行「大賣場及觀光旅館於臺北市之附屬或委託經營之餐飲部門，其販售區及庫存區管理專案」，共計稽查轄內 14 家大賣場及 45 家觀光旅館。107 年 3 月 15 日北市衛食藥字第 10732306600 號、4 月 12 日北市衛食藥字第 10732362500 號及 8 月 3 日北市衛食藥字第 10760586111 號公告，納管星級旅館、中式筵席餐廳及臺北市連鎖自助餐業者。

五、第 14 條外燴報備：

臺北市政府衛生局藉由《臺北市食品安全自治條例》之規範，首創「勸導單」，繼民國 105 年 4 月 21 日以北市衛食藥字第 10533215900 號公告納管觀光旅館及 20 桌以上中式筵席餐廳，公告迄至 107 年 12 月 31 日止，外燴報備及辦案件數為 519 件。

六、第 15 條零售市場及臨時攤販集中場報備：

臺北市政府衛生局於民國 105 年 3 月 25 日食品安全工作小組會議中跨局處研議，達成公告內容、報備格式共識，於 105 年 6 月 27 日以北市衛食藥字第 10536514900 號公告應報備內容。自公告日起至 107 年底報備件數共 131 件，稽查 4,796 家次。

七、第 16 條自主檢驗：

臺北市政府衛生局於民國 105 年 7 月 1 日率先全國以北市衛食藥字第 10536543300 號公告「供應臺北市國民中小學校午餐之餐盒業者」，應每批或至少每學期 1 次，自主檢驗肉品、蔬果、麵條、豆製品等食材。衛生局訂有學校午餐專案稽查計畫，於學期中不定期派員稽查。106 年 2 月 8 日以北市衛食藥字第 10630746200 號公告「具有公司登記且設有實體店面販售，資本額大於新臺幣 500 萬元以上，營業項目包含茶葉批發業（F102050）業者」應實施強制檢驗。針對 16 家餐盒業者執行一級品管輔導暨查核計畫，經查上述業者於 106 年提出自主檢驗報告，檢驗結果符合規定；另查 26 家業者符合公告資本額 500 萬以上並設有實體店面販售 2 種以上原產地（國）混裝或拼裝茶葉，25 家業者提具檢驗報告檢驗結果均符合規定，另 1 家業者經衛生局限期改正後已完成檢驗，檢驗結果符合規定，107 年查核臺北市學校午餐業者，共計 14 家業者，皆有提出自主檢驗報告。



4. Article 12 Regular examination of expired foods and management in different segmentations:

The Department issued the Letter of Taipei-Wei-Shi-Yao-Zi No.10539975000 on November 17, 2016, and Letter of Taipei-Wei-Shi-Yao-Zi No.10631629400 on March 14, 2017, to incorporate the affiliated or outsourced dining department of the chain supermarkets, convenience stores, hypermarkets and tourist hotels into management and asked them to regularly examine expired foods and implement management in different segmentations. The Department executed the “Management Project for the Sales and Inventory Areas of the Catering Department of Chain Supermarkets and Convenience Stores in Taipei City” from February 12, 2018 to February 26, 2018. 45 chain supermarkets and convenient stores underwent random inspection and all of them met the above-mentioned regulations. The Department also executed the “Management Project for the Sales and Inventory Areas of the Affiliated or Outsourced Dining Department of Hypermarkets and Tourist Hotels in Taipei City” from February 22, 2018 to March 16, 2018. 14 hypermarkets and 45 tourist hotels in Taipei City underwent the inspection. By Letters of Taipei-Wei-Shi-Yao-Zi No.10732306600 on March 15, 2018, Taipei-Wei-Shi-Yao-Zi No.10732362500 on April 12, 2018 and Taipei-Wei-Shi-Yao-Zi No.10760586111 on August 3, the Department has incorporated star-ranked hotels, Chinese banquet restaurants and franchise self-service food establishments for the inspection.

5. Article 14 Report of catering service:

The Department, as a pioneer, created the “Exhortation Sheet” pursuant to the “Taipei City Self-Governing Regulations for Food Safety”. It issued the official document of Taipei-Wei-Shi-Yao-Zi No.10533215900 on April 21, 2016, and announced to incorporate tourist hotels and Chinese banquet restaurants with more than 20 tables into management. 519 catering services were reported and handled during the period from the date of announcement to December 31, 2018.

6. Article 15 Report of the retail and open-air markets:

The Department reached a consensus about the contents of the announcement and the format of the report during the cross-department discussion at the Food Safety Task Force Meeting on March 25, 2016 and announced the contents to be reported by official document of Taipei-Wei-Shi-Yao-Zi No.10536514900 on June 27, 2016. 131 reports were received and 4,796 dealers were inspected during the period from the date of announcement to the end of 2018.

7. Article 16 Autonomous examination:

The Department issued the official document of Taipei-Wei-Shi-Yao-Zi No.10536543300 on July 1, 2016 and announced that lunch box providers of junior high schools and elementary schools in Taipei City must conduct autonomous examinations of meats, vegetables, fruits, noodles and bean products by batch or at least once every semester. The Department has established a school lunch box inspection project and designated personnel to conduct the inspection on an irregular basis during the semester. The Department issued the official document of Taipei-Wei-Shi-Yao-Zi No.10630746200 on February 8, 2017 and announced that “dealers that are registered as a companies, set up physical stores to sell products, have a capital amount more than NT\$ 5 million, and incorporate tea wholesale (F102050) in their business items” must undergo inspection. A Level-1 QC, guidance and inspection project was implemented on the 16 lunch box providers. They submitted their autonomous examination reports in 2017 and the results of all the examinations met the requirements of the regulations. 26 lunchbox providers met the announced requirements of capital to the amount of more than NT\$ 5 million and setup of physical stores for selling more than 2 kinds of teas mixed or consolidated in the place (country) of origin. 25 lunchbox providers submitted examination reports and the results of all the examinations met the requirements of the regulations. The Department set a fixed time frame for 1 lunchbox provider and it made improvement and finished the examination within the deadline. The result of the examination met the requirements of the regulations. In 2018, the Department audited a total of 14 school lunch caterers in Taipei City. All 14 had submitted their self-inspection report.



衛生稽查實務研習班

Health Inspection Practice Workshop



▲ 食品安全管制系統（HACCP）及稽查實務教育訓練
Food Safety Control System (HACCP) and Audit Practice Education Training



▲ 中藥藥政管理教育訓練
Chinese Medicine Administration Management Education Training

第三節 強化稽查專業知能

為持續精進臺北市政府衛生局稽查人員專業知能與應變技巧，於民國 107 年 3 月、8 月、11 月分別辦理 3 期「衛生稽查實務研習班」，內容涵蓋食品、藥物、化粧品、醫政、藥政、營業衛生及菸害防制等課程，邀集經驗豐富之講師授課及經驗分享，強化稽查人員執法效能。107 年課程共計 35 小時，230 人次參與。

第四節 強化檢驗服務，提升檢驗量能

一、辦理食品衛生檢驗 48 萬 139 項件、中藥檢驗 8,988 項件、營業衛生檢驗 6,773 項件、化粧品檢驗 240 項件、醫事檢驗 97 項件、受理人民委託檢驗 4 萬 6,376 項件，合計 54 萬 2,613 項件。

二、民國 107 年 8 月 17 日接受衛生福利部食品藥物管理署實地查核認證通過，查核項目包括新增、變更認證項目評鑑及外部查核。

三、民國 107 年 10 月 23 日至 24 日協辦 107 年度全國食品衛生檢驗科技研討會，發表 1 篇口頭論文及 8 篇壁報論文，並獲頒「卓越貢獻獎」、「食藥署 107 年度食品檢驗技術交流平台最佳參與貢獻獎」及「107 年度檢驗行政委託貢獻獎」。



▲ 協辦 107 年度全國食品衛生檢驗科技研討會並獲頒「卓越貢獻獎」
Co-organized the 2018 National Food Sanitation Examination Technology Symposium and received the "Exceptional Contribution Award"



Section 3 Enhancement of the Professional Inspection Knowledge

The Department held 3 sessions of “Health Inspection Practice Workshop” in March, August and November 2018 to further enhance the professional capacity and tactfulness inspection personnel. The workshops covered contents on food, drug, cosmetics, medical administration, pharmaceutical administration, business sanitation and tobacco hazards control. Instructors with extensive experience were invited to lecture and share their experiences with trainees to help them become more effective in their audits. In 2018, the Department held a total of 35 hours of training for 230 participants.

Section 4 Enhancing Examination Service and Improving Examination Capability

1. The Department conducted a total of 542,613 examinations, including 480,139 food sanitation examinations, 8,988 western medicine and Chinese medicine mixture examination cases, 6,773 business sanitation examinations, 240 cosmetics examinations, 97 medical examinations, and 46,376 entrustment examinations by the public.
2. The Department passed the on-site inspection conducted by the Food and Drug Administration on August 17, 2018. The items of the inspection included evaluation of additional and changed recognition item assessment and external inspection.
3. The Department assisted in the hosting of the 2018 National Food Sanitation Examination Technology Symposium held on October 23 and 24, 2018, and presented 1 oral dissertation and 8 poster dissertations in the symposium. For our efforts, the Department was presented with the “Exceptional Contribution Award”, the “Best Participation and Contribution Award of Food Examination Technology Exchange Platform for 2018” and “Award of Contribution for Administrative Entrustment in Inspection for 2018”.





- 四、民國 107 年 8 月 26 至 29 日參加在美國喬治亞州亞特蘭大舉行的 2018 年國際公定分析化學家協會（Association of Official Analytical Chemists, AOAC）第 132 屆年會，發表壁報論文 2 篇。107 年 11 月 2 日於 107 年 AOAC 臺灣分會年會暨學術研討會發表 2 篇壁報論文。
- 五、民國 107 年開發腸桿菌科、市售包裝飲品中牛奶過敏原、禽畜產品中農藥（125 項）、馬鈴薯龍葵鹼（食品中配醣生物鹼）、油品中殘留溶劑、菇類重金屬及蛋類重金屬等 7 項新興檢驗技術。

第三章 落實消費者權益保護

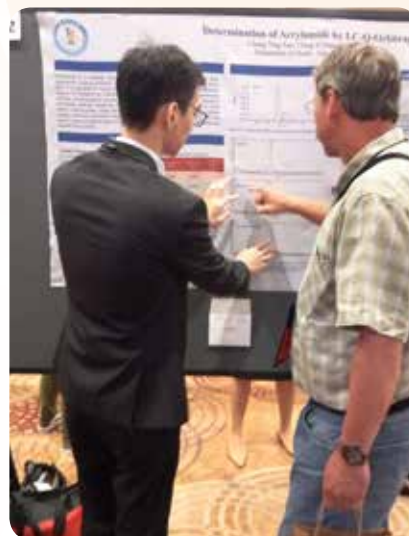
第一節 優化食藥粧網路地圖

食藥粧網路地圖 iMAP 於民國 105 年 8 月 24 日上線，創全國之先，揭露臺北市餐飲業者衛生稽查結果、居家廢棄藥物檢收站及家庭藥師藥局等資訊及業者定位，並配合時下關注話題設立相關熱門專區，提升網站可見度及關注度，107 年 3 月 17 日推出「臺北市食安資訊入口網」（<http://foodsafety.health.gov.tw>）提供民眾同時選擇臺北市食藥粧網路地圖（iMAP）及臺北市食材登錄平台，隨手即可查詢餐飲衛生動態稽查結果及食材來源資訊，隨時關心食安。增闢「通勤族美食」、「商圈美食」、「百貨美食」3 種簡易搜尋模式，並提升網站互動性，增加留言及評價功能。107 年 12 月 10 日率先全國推出「健康風險專區」，教民眾依抽驗結果試算不符規定蔬果之每日可接受攝食量，讓民眾看得懂數據，瞭解正確健康風險概念。截至 107 年 12 月 31 日，食藥粧網路地圖已揭露 7,143 家餐飲業者及 329 家加入居家廢棄藥物檢收或家庭藥師的藥局資訊，網站總瀏覽人次達 64 萬 7,018 人次，平均每月 2 萬 3 千人次瀏覽。



▲ 臺北市食藥粧網路地圖—健康風險專區
iMAP (the Food and Drug Inspection Map Taipei)-Health Risk Assessment

4. The Department participated in the 2018 132nd Annual Meeting of the Association of Official Analytical Chemists (AOAC) held in Atlanta, Georgia, U.S.A. from August 26 to 29, 2018, and made 2 poster presentations. The Department made 2 poster presentations at the 2018 132nd Annual Meeting of AOAC International, Taiwan Section, and Academic Symposium on November 2, 2018.
5. In 2018, the Department developed 7 new testing techniques, including the test for enterobacteriaceae, milk allergens found in packaged drinks in market distribution, pesticide content (125 items) in livestock products, tuber solanine (glycoalkaloids in foods), residual solvents in oil products, heavy metal content in mushrooms and eggs.



▲ 於 107 年國際公定分析化學家協會 (AOAC) 132 屆年會發表 2 篇壁報論文
In 2018, the Association of Official Analytical Chemists (AOAC) published 2 papers in the 132nd annual meeting

Chapter 3 Protecting Consumer Rights

Section 1 Optimization of the Food and Drug Inspection Map Taipei

The Food and Drug Inspection Map Taipei (iMAP) was officially launched on August 24, 2016 as the pioneer service in Taiwan to disclose the results of inspection on the sanitation of catering businesses, information on household medical waste collection stations and pharmacies for family pharmacists and the location of relevant businesses. The website also features a section for the latest topics to increase exposure and attract more visitors. On March 17, 2018, the Department launched its "Taipei City Food Safety Portal Website" (<http://foodsafety.health.gov.tw>) that features both the iMAP (map for food, drug and cosmetic products) and Food Tracer Taipei Platform for citizens to search for relevant food and beverage safety audit results and sources of food ingredients at any time to stay up to date on the issue of food safety. The website also features three new simple search functions under "Food Recommendations for Commuters", "Food Recommendations in Business Districts" and "Departmental Store Food Recommendations" along with enhanced inter activity from the posting and rating functions. On December 10, 2018, the Department also became the first health agency in Taiwan to launch its "Health Risk Area" as a tool to educate the general public to determine the acceptable daily intake of noncompliant agricultural products based on the latest inspection results, so that the statistical data would make more sense to the general public as they foster the correct concepts on health risk. As of December 31, 2018, the website disclosed the information of 7,143 catering businesses and 329 household medical waste take-back stations and pharmacies for family pharmacists. The number of visitors to the website was 647,018, meaning an average of 23,000 persons visited the website every month.



第二節 消費爭議權益保護

- 一、設立消費者服務專線（02）2720-8777，提供消費者遇到突發狀況能有適當管道諮詢或申訴。受理消費者藥物、化粧品、食品等檢舉案件 7,367 件。
- 二、為促進企業經營者有效處理消費爭議損害事件，提供民衆消費申訴管道，保障消費者權益，共受理消費爭議案 603 件，其中 508 件調處成功，95 件未獲妥處（52 件移由臺北市政府法務局消保官繼續進行調處，其他包含移其他縣市政府辦理、消費者主動撤銷申訴或無法聯繫申訴者共計 43 件）。

第三節 用藥安全及藥物濫用防制宣導

民國 107 年 5 月 1 日至 8 月 31 日配合暑期保護青少年－青春專案辦理藥物濫用防制宣導，結合臺北市政府各局處及所屬聯合稽查隊、健康服務中心、小學國（高）中、區公所、鄰里長辦公處、臺北市藥師公會及轄內各醫學中心、區域醫院等單位共同辦理反毒、藥物濫用防制等多樣性宣導活動 597 場，共計 10 萬 8,667 人參與，其中為了從小建立學童正確的用藥安全、反毒及藥物濫用防制觀念，在暑假期間結合臺北市立聯合醫院及財團法人顏焜熒文教基金會，分別於 107 年 7 月 2 日辦理「小華佗中醫研習營」，15 日辦理「【智慧成長·幸福未來】希望種籽暑期生活營」，21、28 日辦理「小小魔法藥師營」，以「正確用藥」、「毒品危害暨藥物濫用防制教育」為主題，教導正確用藥教育知能，如何辨識毒品、認識毒物，濫用毒品的後果及觸犯之刑責，增進學生對身心保健知識及自我照顧能力，透過參加體驗營活動，進而增長正確用藥、毒品危害暨藥物濫用之觀念，將正確用藥觀念延伸至校園。

設計溫馨易辨識之「藥物濫用防制諮詢站」標章，讓民衆能清楚辨識並善加運用，藉由臺北市社區藥局諮詢站在地性及便利性，透過專業藥師服務，成社區守護網，並提供藥物濫用及毒品危害等相關諮詢服務與宣導單張，以期達到早期偵測藥物濫用問題，並適時提供正確就醫管道，預防藥物濫用問題惡化。



▲ 用藥憑處方·人生好健康—用藥安全暨藥物濫用防制園遊會

Medication by prescription. Health Life, Medication Safety, and Drug Abuse Prevention Fair



▲ 「小小魔法藥師營」活動
“Junior Magic Pharmacist Camp” Event



Section 2 Safeguarding Rights in Consumer Disputes

1. A consumer service helpline (02) 2720-8777 was established to provide an appropriate channel for inquiries or appeals of incidents. A total of 7,367 cases of consumer reports on drugs, cosmetics and foods were received.
2. To encourage business owners to respond effectively to consumer disputes and grievances and to safeguard consumer rights, a consumer appeal system was provided to the public. A total of 603 cases of consumer disputes were received and handled, of these 508 cases were successfully mediated while 95 cases have yet to be settled (52 cases were transferred to the consumer protection group under the Department of Legal Affairs of the Taipei City Government for continued mediation, 43 other cases included the cases transferred to other counties or city governments, and the cases either rescinded by the consumer or that contact could no longer be made with the complainant).

Section 3 Promotion of Safe Drug Use and Prevention of Drug Abuse

From May 1 to August 31, 2018, in coordination with the “Protecting Teenagers in Summer: Youth Project” and cooperating with institutes such as Taipei City Government departments, offices and their joint inspection teams, health centers, elementary schools, junior (senior) high schools, district offices, neighborhood offices, Taipei Pharmacists Association and medical centers under its administration, and regional hospitals to hold various anti-drug and drug abuse prevention promotion events. A total of 597 events were held with 108,667 participants, to help children foster the right concepts and awareness for safe medication practice, anti-drug use and prevention of substance abuse, the Department has collaborated with Taipei City Hospital and Yen Kun-Ying Education Foundation by organizing events such as the “Junior Huatuo TCM Camp” on July 2, 2018 “Grow Smart for Brighter Future’ Seeds of Hope Summer Camp” on July 15 and the “Junior Magic Pharmacist Camp” on July 21 and 28 to cover topics such as proper drug use and protection from drugs and prevention of substance abuse, participants were taught about the correct use of medication, identification of drugs, basics of drugs, consequences of drug use and the criminal liabilities arising from it. By taking part in such events, students got to learn more about these topics and thereby help to spread the knowledge of proper medication in their schools.

The “Drug Abuse Prevention Query Station” logo was designed with harmonious elements for easy identification by the public in order to encourage proper use. Through the localization and accessibility of community pharmacies in Taipei City as well as services provided by professional pharmacists, a defense network was created for the entire community. Inquiry services and promotional leaflets regarding the hazards of drug abuse were provided as well. The aim of these measures was to achieve early detection of drug abuse, provide proper and timely referral for medical assistance and prevent the problem of drug abuse from worsening.



臺北市府與澎湖縣政府共同推動「家庭藥師計畫」
Taipei Penghu Cooperative Family Pharmacist Project



▲ 合作記者會
Press Conference



▲ 成果發表會
Results Presentation

第四節 家庭藥師及廢棄藥物檢收

「家庭藥師」制度，打破過去藥師只送藥或調配慢性病處方箋的服務模式，由臺北市執業藥師（以社區藥局藥師為主）主動介入臺北市老人福利機構或社區中有藥事照護需求的民衆，同時協助臺北市健康中心照顧有藥事照護需求的弱勢失能民衆，利用雲端藥歷的查詢及對個案用藥的建檔管理，提供專業的藥事照護服務。針對老人福利機構、社區及居家民衆，提供藥物治療評估與建議、藥物諮詢服務及指導。民國 107 年度已服務老人福利機構 42 家，住民 1,420 人次，並提供 306 人次的居家藥事照護服務及 1,236 人次的社區藥事照護服務。另跨海協助澎湖縣政府共同推動「家庭藥師計畫」，完成人員招募、藥師訓練以及實地陪同訪視等。完成 124 人次個案訪視，成功輸出經驗、資源分享，協助資源缺乏離島快速建構藥事照護模式，展現首都高度與縣市政府共享共榮，此合作案並獲得臺北市府 107 年創意提案競賽跨域合作獎季軍。

藉由藥事專業人員協助，提供民衆正確用藥的觀念，使民衆理解隨意丟棄剩餘或過期藥物可能造成環境汙染及生態衝擊，並瞭解家中儲存藥物環境，解決廢棄藥物處理不當的問題，於全市設置 360 個居家廢棄藥物檢收站點（含 300 個社區藥局、48 家醫療院所及 12 區健康服務中心），民國 107 年共檢收廢棄藥物 2 萬 3,266 公斤。

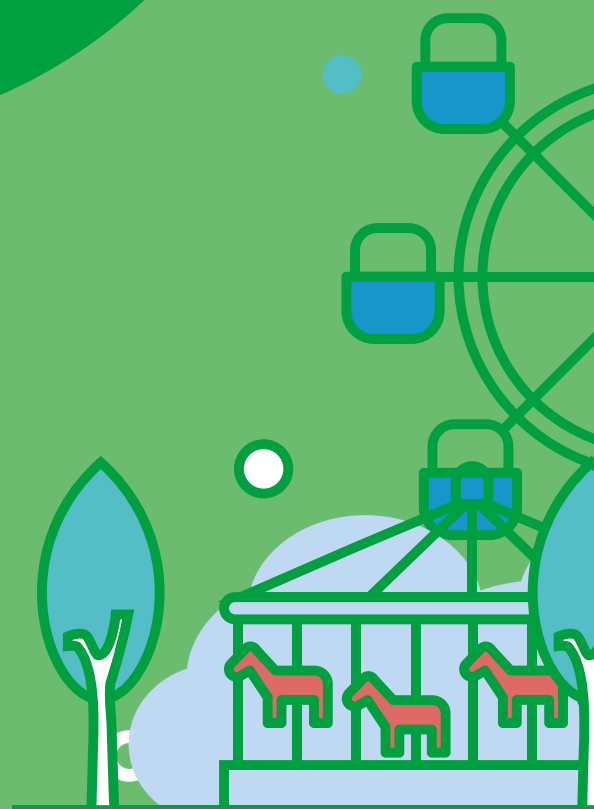


Section 4 Family Pharmacists and Medical Waste Take-Back

Compared with the service model where pharmacists are only responsible for delivering medicine or writing prescriptions for chronic diseases, the “family pharmacist” system allows practicing pharmacists (mainly from community pharmacies) in Taipei City to actively engage with senior care institutes or citizens in communities with demands for pharmaceutical care. Pharmacists can also assist health centers in looking after disadvantaged and disabled citizens with demands for pharmaceutical care. Professional pharmaceutical care is provided through inquiries on the Pharma Cloud System and management of the medication history in individual cases. Under the system, citizens in senior care institutes, communities and at home are offered assessments and suggestions on medical treatment and consultation and guidance on medication. In 2018, The Department served 42 senior care institutes with 1,420 patients in total. Services were further provided to 306 patients at home and 1,236 patients in their respective communities. Not only that, the Department also assisted Penghu County Government in the joint promotion of “Family Pharmacist Project” by helping with the completion of personnel recruitment, pharmacist training, on site visits and so forth. The Department made 124 visits for family pharmacists in this project and managed to share our experiences and resources to help offshore islands that are lacking in resources to establish their local pharmaceutical care services. The collaboration is a prime example of collaboration between the capital city and other municipal governments for resource sharing and mutual success and it has received the 3rd prize for cross-territory cooperation in Taipei City Government’s creative proposal competition in 2018.

Professional pharmaceutical personnel provided support to citizens in assessing drug storage environments and gave lessons on proper drug use concepts in order to improve public understanding of the environmental pollution and ecological impacts caused by improper discarding of unused or expired drugs, and solve the problem of improper disposal of medical waste. Across Taipei City, 360 household medical waste take-back stations (300 in community pharmacies, 48 in hospitals and 12 in health centers) were established. The stations have collected 23,266 kg of medical waste in 2018.

第三篇
促進
市民健康



3

Promote Public Health





第三篇 促進市民健康

第一章 健康促進與維護

第一節 婦幼及優生保健

一、優生保健

辦理人口政策宣導活動、提供生育補助及各項優生保健補助措施服務等。「助妳好孕」專案提供婚後孕前健康檢查、孕婦唐氏症篩檢等補助，計補助 1 萬 6,488 人。提供特殊群體（已婚智障、精障及未成年生育婦女）生育調節（結紮、裝置子宮內避孕器及人工流產）補助計 21 案。辦理產前遺傳診斷、遺傳性疾病檢查計 7,107 案。



▲ 婚後孕前健康檢查記者會
Pre-pregnancy Health Checkup Press Conference

二、新移民健康照護

執行新移民健康關懷訪視，提供優生保健、生育保健知能宣導，提供新婚登記個案訪視 805 案；懷孕婦女產前衛教諮詢服務 189 案，產後婦女及其子女訪視 731 案。於臺北市十二區健康服務中心設置「保健諮詢站」，由新移民志工及通譯員提供醫療衛生資訊與通譯服務，計服務 4,070 人次；製作多語版「新移民健康照護隨身 CALL」手冊、「學兒減度防齲」及「成人健檢及癌症篩檢」之海報與單張，提供新移民使用。成立新移民支持團體，提供身心照護相關活動 31 場，計 1,150 人次參加。辦理中高齡新移民健康促進講座 8 場，計 160 人次參加，並結合萬華及南港新移民會館辦理 2 場整合式篩檢服務。

三、母乳哺育

輔導臺北市機構設置哺集乳室，其中 427 家為依法應設置哺集乳室之機構，民國 107 年設置 980 間哺集乳室。推動「優良哺集乳室認證」活動，效期為 3 年，105 至 107 年計 620 間哺集乳室通過認證。辦理社區母乳支持團體及職場健康講座 78 場次，計 2,135 人參與；辦理護理人員、母乳志工、保母、藥事人員母乳哺育教育訓練 6 場次，計 822 人參訓。設置母乳諮詢專線，服務 7,590 人次。提供產後婦女關懷訪視及母乳指導計 2 萬 1,685 人次。21 家母嬰親善醫療院所，住院期間純母乳哺育率 53.08%。



Part 3 Promote Public Health

Chapter 1 Health Promotion and Maintenance

Section 1 Maternal and Child Health and Eugenic Health

1. Eugenic Health

Organized population policy promotion events and provided various eugenic health subsidies measures and services. The “Have a Care-free Pregnancy” project provided subsidies on postnuptial pregnancy health examination, Down’s syndrome screening for pregnant women and others, in which 16,488 people received subsidies. Birth control (ligation, IUD and abortion) subsidies were provided to specific populations (married mentally retarded, mentally disordered and underage pregnant women), which included 21 cases. A total of 7,107 cases of prenatal genetic diagnosis and genetic disease examination were conducted.

2. Healthcare for New Immigrants

New immigrant caring visitations were implemented to provide eugenic health and reproduction healthcare knowledge and education. Visitations were implemented in 805 newlywed cases. The Department paid prenatal visits and gave care to pregnant women in 189 cases, and paid postnatal visits to women and their newborns in 731 cases. “Health Consultation Stops” were established at 12 district health centers in Taipei City. New immigrant volunteers and interpreters have served 4,070 persons with health information and interpretation services; multi-language posters and handouts of “Call at any Moment for New Immigrant Health Care”, “Dental Cavity Prevention for Children”, “Health Check-up and Cancer-Screening for Adults” were prepared for new immigrants. New immigrant support groups were established, with 31 physical and mental care related events organized for 1,150 participants. The Department organized and held 8 health promotional seminars for middle-aged and senior new immigrants, attended by a total of 160 participants. In addition, 2 integrated screening services were held at Wanhua and Nangang New Immigrants’ Hall.

3. Breast-feeding

We instructed various agencies in Taipei City to establish breastfeeding rooms, and 427 agencies were legally obliged to establish breastfeeding rooms. In 2018, a total of 980 breastfeeding rooms were established. The Department promoted the “Outstanding Breastfeeding Room Recognition” campaign, which lasted for 3 years; between 2016 and 2018, a total of 620 breastfeeding rooms were recognized. Community breastfeeding support groups and workplace health seminars were held, including 78 sessions with 2,135 participants. 6 sessions of education and training on breastfeeding for nurses, volunteers, baby-sitters and pharmacists were organized, with 822 participants. We also set up a breastfeeding consultation hotline, which helped to serve 7,590 persons. The Department also paid caring visits and breastfeeding guidance for 21,685 postnatal women. 21 hospitals passed the Mother and Infant Friendly Medical Institute Recognition, and the exclusive breastfeeding rate was 53.08%.



四、兒童預防保健及發展篩檢

針對 0 至 6 歲兒童進行篩檢服務，計服務 11 萬 7,922 人次，發現疑似異常或遲緩兒童 420 人，轉介社會局及健康服務中心追蹤與管理。結合 6 家醫療院所辦理 8 場次兒童健康服務整合一站式試辦方案，計服務 1,250 人。健康服務中心進行臺北市 0 至 3 歲新移民、原住民、中低與低收入戶及身心障礙者子女兒童發展篩檢檢核，計 4,202 人。辦理 2 場「兒童發展篩檢研習會」，計 320 人次參加。運用各類行銷管道，增加民衆對兒童發展篩檢認知，並建置「兒童發展圖像篩檢互動網」，提供宣導單張、多語版兒童發展檢核表單等下載。



▲ 兒童健康服務整合一站式活動
Integrated One-Stop Event for Child Health Services

五、新生兒篩檢

臺北市 35 家特約醫療院所提供新生兒聽力篩檢服務，計篩檢 2 萬 7,426 名新生兒，完成疑似異常個案轉介計 191 人。28 家特約醫療院所提供新生兒危急型先天性心臟病篩檢服務，計篩檢 2 萬 1,928 名新生兒，完成疑似異常個案轉介計 26 人。新生兒先天性代謝篩檢補助 2 萬 5,798 案，完成確診陽性個案 253 案追蹤。

第二節 兒童及青少年保健

一、學齡前兒童視力、聽力、口腔篩檢與保健

- (一) 辦理臺北市公、私立幼兒園免費「兒童整合性篩檢服務」，計服務 6 萬 2,519 人次。
- (二) 提供國小一年級學童牙醫到校塗氟，並辦理校園衛生教育講座，民國 107 年計服務 3 萬 7,680 人，辦理 440 場校園口腔衛教宣導講座。
- (三) 辦理「107 年臺北市學齡前兒童整合性社區篩檢實務訓練」初階及進階研習會計 4 場次，邀請臺北市十二區健康服務中心及合約醫療機構相關人員參訓，計 254 人。
- (四) 為提升學齡前兒童整合性篩檢服務品質，辦理 2 梯次「107 年學齡前兒童整合性社區篩檢研習會」，邀請臺北市公、私立幼兒園教保人員參訓，計 323 人。



▲ 國小一年級學童牙醫到校塗氟
Dentist Fluoride Application for First-graders at School



▲ 兒童整合性篩檢暨發展篩檢研習會
Children's Integrated Screening and Development Screening Seminar



4. Preventive Healthcare and Development Screening for Children

The Department provided screening services to children between the ages of 0 and 6. A total of 117,922 children received the services, in which 420 children were discovered as possible abnormal or developmental retarded. Referral to the Department of Social Welfare and Health Service Center for follow-up and management. The Department collaborated with 6 medical institutions and hospitals to host 8 sessions for the pilot program of one-stop health service to children in Taipei City, serving a total of 1,250 persons. Health centers in Taipei City conducted development screening and assessment on children between ages 0-3 who were the offspring of new immigrants, indigenous people, medium-low and low-income families and physically and mentally disabled persons. A total of 4,202 children were screened. The Department held 2 sessions of “Children Development Screening” for a total of 320 participants. Various marketing channels were utilized to increase public understanding on children development screening. To this end, the “Children Development Profile Screening Interactive Site” has been built to provide leaflets and multi-language children development assessment sheets and other materials.

5. Screening for Newborns

35 medical institutions in Taipei City were commissioned to provide hearing tests for newborns. A total of 27,426 newborns were screened; a total of 191 referrals were made for suspected cases of abnormality. 28 medical institutions provided newborns with CCHD screening services. A total of 21,928 newborns were screened; a total of 26 referrals were made for suspected cases of abnormality. 25,798 cases of congenital metabolic disorder screenings for newborns were subsidized and with follow-up on 253 cases with positive test results.

Section 2 Children and Adolescents Healthcare

1. Vision, Hearing and Oral Health Screening and Health Care for Pre-School Age Children

- (1) The Department provided free “Integrated Screening Services for Children” in various public and private kindergartens in Taipei City, serving a total of 62,519 children.
- (2) Fluoride treatment was provided on campus along with relevant oral health and sanitation workshops held for first-grade elementary students. In 2018, the service has benefited a total of 37,680 students, with 440 oral health and sanitation workshops held at various schools.
- (3) A total of 4 basic and advanced Practical Training Sessions for the “2018 Taipei Pre-School Age Children Integrated Community Screening Scheme” were held for 254 staff members from the 12 district health centers and contracted medical institutions.
- (4) In order to improve the quality of integrated screening services for preschool children, two “2018 Preschool Children Integrated Community Screening and Children Development Screening Seminars” were held for 323 teachers and caregivers from public and private kindergartens of Taipei City.



二、學齡兒童減度防齲

- (一) 結合臺北市 95 家、新北市 51 家眼科醫療院所提供國小一至六年級學童免費專業視力檢查，民國 107 年計服務 6 萬 5,881 人次。
- (二) 辦理「107 年『My戶Eye精彩繪暑我最厲害』視力保健畫作徵選活動」，計收件 704 件，選出 24 件優秀作品。
- (三) 辦理臺北市國小學童「護眼密碼趣味競賽」推廣活動，計有 20 所學校參加。
- (四) 結合其他局處辦理設攤護眼宣導活動【Eye眼要知道 健體好easy】計 2 場次，共 1,110 人參加。



▲ 學童免費專業視力檢查
Free Professional Vision Tests for School Children

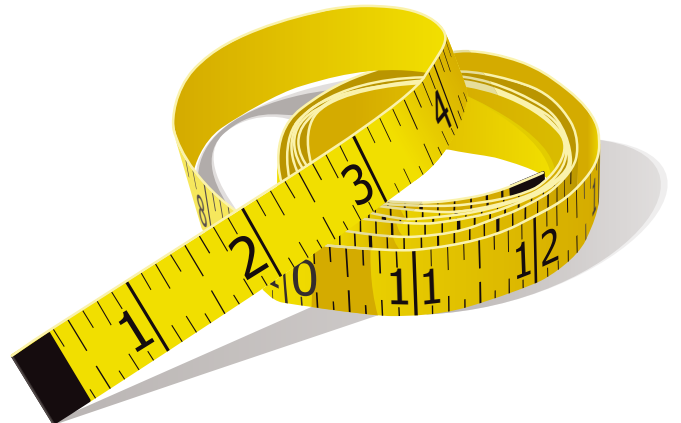


▲ 護眼密碼趣味競賽
Eye Care Password Fun Contest

三、青少年健康促進

結合醫療院所及相關專業團體，發展具特色之青少年健康促進計畫，使其主動深入校園或社區推動宣導工作，促進青少年健康。

- (一) 為提升氣喘衛教及照護知能，辦理教保人員、學校教師、衛生教育相關人員「氣喘防治及照護」宣導課程共 2 場次，計 66 人參與。
- (二) 於臺北市國小、國中、高中（職）學校辦理 64 場性健康促進校園巡迴講座，計 1 萬 1,192 人參與。
- (三) 為培養學童健康的生活習慣與態度，積極結合專業醫療院所及相關學、協會，辦理臺北市國小校園巡迴列車活動，規劃視力、健康體位及菸害防制等 3 類健康套餐課程，委託 12 家醫療院所於臺北市公、私立國民小學辦理 95 場校園巡迴列車程宣導講座，計 2 萬 5,590 人參與。
- (四) 辦理「全『體』保『位』－幸福抱抱 圈出健康」宣導健康體位及定期量測腰圍，計 5,823 人參加。





2. School Age Children Diopter Decreasing and Dental Caries Prevention

- (1) Ophthalmology medical institutions from Taipei (95 institutions) and New Taipei City (51 institutions) provided “free professional vision tests” to a total of 65,881 students from grades 1 to 6 in Taipei City in 2018.
- (2) The Department organized the “2018 Painting for Eyesight Protection” Competition for entries on eyesight protection. From the total of 704 entries received, 24 outstanding submissions were chosen for the award.
- (3) In 2018, the promotional event “Eye Care Password Fun Contest” was held for students of elementary schools in Taipei City. A total of 20 schools participated in the event.
- (4) The Department collaborated with other units and implemented two sessions of the eyesight protection promotional event “Easy Tips and Tricks on Vision Care and Physical Fitness” for a total of 1,110 participants.



3. Health Promotion for Adolescents

In cooperation with medical institutions and related professional organizations, featured adolescent health promotion programs have been developed so that the institutions and organizations may actively enter schools and communities to support awareness efforts and promote adolescent health.

- (1) In an effort to boost awareness for asthma and care for asthma patients, the Department had held two sessions of “Asthma Prevention Workshop” for caregivers, teachers and personnel involved in health education. The workshops were attended by a total of 66 participants.
- (2) A total of 64 campus tour seminars on sex education for adolescents were implemented across junior high, senior high and vocational schools in Taipei City. A total of 11,192 students participated in these seminars.
- (3) To develop healthy living habits and attitudes among schoolchildren, the Department actively worked with a number of professional medical institutions, academic organizations and associations to organize the Taipei Elementary School Campus Tour Bus activity. The activity offered 3 categories of health packages and courses for visual acuity, healthy weights and tobacco hazards control. 12 medical institutions were commissioned to conduct 95 Campus Tour Bus Awareness Seminars in public and private elementary schools in Taipei City. A total of 25,590 persons attended these seminars.
- (4) To promote healthy body and the habit of taking waistline measurement, the Department has organized the “Better Health for All - Hug for Joy and Measure Your Waistline for Fitness” event for a total of 5,823 participants.



第三節 成人保健

一、心血管疾病預防與保健

- (一) 民國 107 年臺北市 40 歲以上民衆社區三高篩檢計篩檢 27 萬 8,274 人次，異常及疑似異常個案計 7 萬 870 人次，完成追蹤 6 萬 9,169 人次，追蹤轉介完成率 97.60%。
- (二) 107 年臺北市心血管疾病防治網有效認證之醫事人員計 268 人（醫師 88 人、護理人員 102 人、營養師 44 人、藥師 33 人、其他醫事人員 1 人）；認證醫療機構累計 317 家。



▲ 社區進行三高篩檢
Community Blood Pressure, Glucose, and Lipid Screening

二、糖尿病及腎臟疾病預防與保健

- (一) 107 年臺北市糖尿病共同照護網，有效認證之醫事人員計 842 人（醫師 366 人、護理人員 298 人、營養師 140 人、藥師 36 人、其他醫事人員 2 人）；認證醫療機構累計 152 家，糖尿病共同照護網醫事人員教育訓練課程共 4 場，計 729 人參加。
- (二) 107 年 3 月 25 日臺北市政府衛生局與台灣腎臟醫學會假臺北市信義區香堤大道合作辦理「2018 世界腎臟病日『愛腎護腎、腎利人生』園遊會」，計 1,000 人參與。
- (三) 於 7 月 21 日假臺北市立聯合醫院忠孝院區辦理「臺北市糖尿病共同照護網醫事機構推動分享工作坊」，計 70 人參加，以強化臺北市醫療院所糖尿病照護品質，並藉由專家輔導實地訪查 15 家醫療院所，以持續提升糖尿病照護量能。

三、老人健康檢查

設籍臺北市滿 65 歲以上市民及 55 歲以上原住民，每年可免費接受老人健康檢查 1 次，107 年計 4 萬 5,715 人預約，預約率 99.38%，全數完成受檢，受檢率 100%。

四、慢性病個案管理服務

針對獨居長者、腦血管疾病、失能、高血壓、高血脂及糖尿病等慢性病市民，提供關懷訪視、健康諮詢、三合一健康篩檢、健康需求評估等服務，民國 107 年提供獨居長者健康照護服務計 5,085 人次、個案管理服務 2,139 人、健康關懷 2,946 人。

Section 3 Adult Healthcare

1. Prevention and Care of Cardiovascular Diseases

- (1) In 2018, screening of Taipei City citizens at or above the age of 40 for hyperglycemia, hypercholesterolemia and hypertension was carried out for a total of 278,274 persons. Among them, 70,870 persons were found to have/to be suspected cases of abnormality. Tracking was completed on 69,169 persons, with a tracking and referral rate of 97.60%.
- (2) In 2018, Taipei City Cardiovascular Disease Prevention Network encompassed a total of 268 persons as medical personnel (88 physicians, 102 nurses, 44 dietitians, 33 pharmacists and 1 other medical personnel) across a cumulative total of 317 certified medical institutions.

2. Prevention and Healthcare for Kidney Diseases and Diabetes Mellitus

In 2018, the Taipei City Diabetes Shared Care Network encompassed a total of 842 persons as medical personnel (366 physicians, 298 nurses, 140 dietitians, 36 pharmacists and 2 other medical personnel) across a cumulative total of 152 certified medical institutions. 4 sessions of medical personnel training were held for 729 participants.



▲ 「2018 世界腎臟病日『愛腎護腎、腎利人生』園遊會」
“2018 World Kidney Day ‘Love & Protect your Kidneys Victorious Life’ Fun Fair”

- (1) On March 25, the Department collaborated with the Taiwan Society of Nephrology in the organization of the “2018 World Kidney Day ‘Love & Protect your Kidneys Victorious Life’ Fun Fair” at Xiangti Boulevard in Xinyi District, with 1,000 participants.
- (2) On July 21, the Department organized the “Workshop for Experience Sharing by Medical Institutions Under the Taipei City Diabetes Shared Care Network” at the Zhongxiao Branch of the Taipei City Hospital, with 70 participants. The aim of the event was to improve the quality of care provided by medical institutions in Taipei City to patients with diabetes. Experts conducted on-site visits to 15 medical institutions in order to keep enhancing their capacity to provide care for patients with diabetes.

3. Health Check-Up Service for Senior Citizens

Citizens at or above the age of 65 and indigenous people at or above the age of 55 who register their residence in Taipei City can get an annual senior health examination for free annually. In 2018, 45,715 persons reserved the service (99.38 % reservation rate), and all of them completed the examination (100% examination rate).

4. Chronic Disease Case Management Service

For Taipei City citizens including seniors who live alone, cerebrovascular disease patients, incapacitated citizens, hypertension patients, hyperlipidemia patients, diabetes patients and those with other chronic diseases, the Department provided caring visits, health consultation, three-in-one health screening, health necessity evaluation and other services. In 2018, 5,085 seniors who lived alone received healthcare services, and 2,139 persons received case management service. 2,946 persons received caring visits.



五、市民健康保健服務

為維護臺北市民健康、照顧弱勢族群、促進社區健康服務、建立民衆自主健康管理並關懷慢性病患者之健康，自民國 98 年 4 月起開辦「市民健康生活照護服務」（104 年更名為「市民健康保健服務」），提供民衆血壓或血氧、額溫、身高及體重等自主便利量測服務，累計至 107 年生理量測服務達 438 萬 2,544 人次，話務服務量達 37 萬 8,374 通。

六、長者衰弱篩檢服務

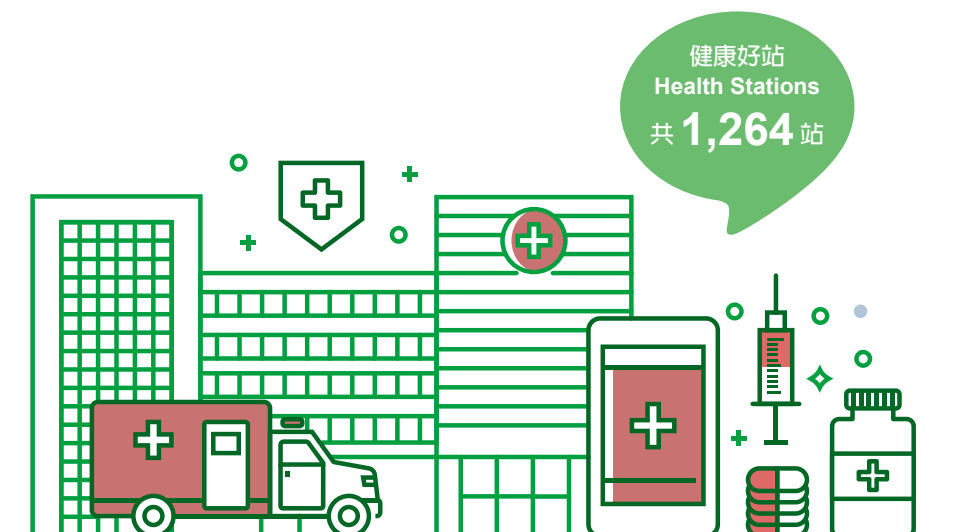
為強化社區初級預防功能，降低臺北市長者衰弱症發生率，臺北市政府衛生局藉由成人健康檢查、社區篩檢、居家訪視等活動，透過長者簡易健康篩檢評量表，篩檢出衰弱之高危險長者，並依篩檢結果提供轉介服務，以完成在地老化政策目標。民國 107 年完成 2 萬 9,963 位長者衰弱篩檢評估，其結果「衰弱前期」占 14.76%，「衰弱期」占 4.22%，依長者意願轉介至醫事機構、長照中心等單位提供介入及照護服務。

第四節 癌症防治及原住民族保健

辦理婦女子宮頸抹片檢查、乳房攝影檢查、大腸癌篩檢、口腔癌篩檢等癌症防治相關服務。

一、癌症防治便利網

辦理「臺北市癌症防治社區紮根計畫」及四大癌症防治暨陽性個案追蹤計畫、建置臺北市「癌症防治便利網」，結合臺北市醫院及基層醫療院所，廣設健康好站共 1,264 站，提供臺北市民可近性之癌症篩檢服務暨癌症防治資訊。





5. Healthcare Services for Citizens

To protect the health of Taipei City citizens, care for disadvantaged groups, promote community health services, form the citizens' concept of health self-management, and take care of the health of chronic disease patients, in April 2009, the "Citizen Health Life Care Service" (renamed "Citizen Health Care Service" in 2015) was launched to provide citizens with convenient self-management measuring services. As of 2018, physiological measuring services were provided to 4,382,544 persons with 378,374 telephone calls received.



▲ 民衆進行自主健康管理
Citizen Self-Health Management

6. Screening for Frailty in Seniors

To strengthen the function of primary prevention of communities and reduce the rate of frailty in seniors in Taipei City, the Department conducts adult health examination, community screening and household visits. Using a concise form for senior health screening evaluation, the Department identifies seniors with a high risk of frailty and refers their cases on the basis of the screening results to achieve the objectives of aging in place policies. In 2018, screening and evaluation for frailty were conducted for 29,963 seniors. The results showed that 14.76% of them fell in the "pre-frail stage", while 4.22% of them were at the "frail stage". In accordance with their wishes, the seniors were referred to medical institutions and long-term care centers for intervention and care services.

Section 4 Cancer Prevention and Healthcare for the Indigenous Peoples

Services such as pap-smear screening for cervical cancer, mammography for breast cancer, colorectal cancer screening and oral cancer screening are provided.

1. Taipei Cancer Prevention Network

Implement the "Cancer Prevention of Rooting Taipei City Community Project" and the "Four major cancers prevention and positive screening case tracking project" and constructed the Taipei "Cancer Prevention Network" which established, 1,264 Health Stations with hospitals and medical institutions in Taipei to provide citizens accessible cancer screening service and cancer prevention information.

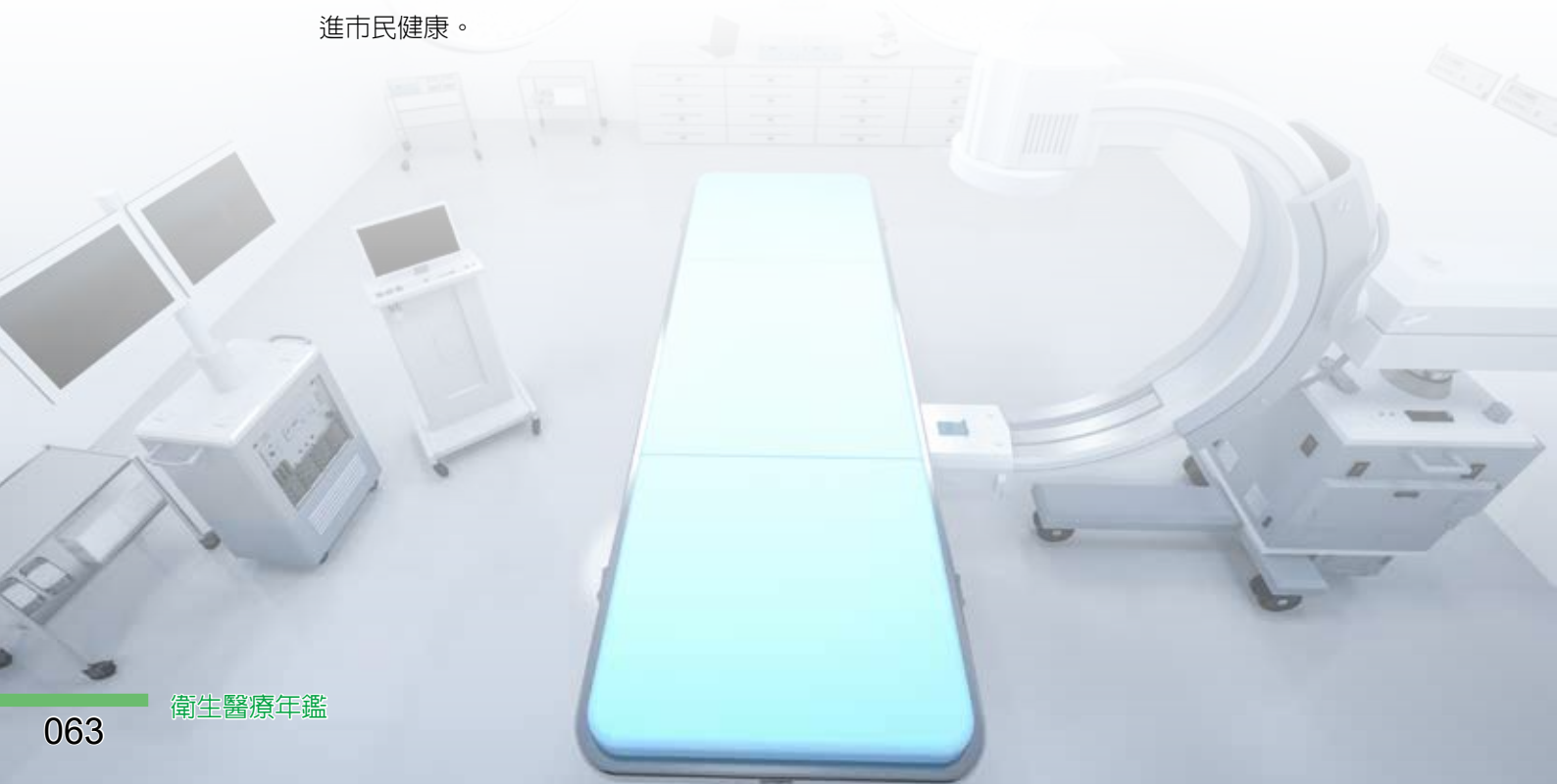


二、精實癌症篩檢通知流程，並運用多元宣導

- (一) 「癌症篩檢一對一邀約語音提醒通知服務」、電話、手機簡訊、寄發E-post等方式進行篩檢邀約，通知民衆參加癌症篩檢。
- (二) 辦理記者會並發布新聞稿、透過社群網路及臺北市市府網絡，如：市府官方臉書我是台北人、「柯P健康LINE群組」等宣導癌症防治訊息，以提升民衆篩檢認知。
- (三) 結合「台北卡－健康服務」，鼓勵民衆參加兒童發展篩檢及四大癌症篩檢，兌換「悠遊卡」增值金，民國 107 年癌症篩檢點數為 910 萬 2,900 點，計篩檢 9 萬 307 人次。
- (四) 臺北市政府衛生局與資訊局合作運用資通訊科技，首創「防癌知識+」智能服務，透過臺北市政府 LINE 官方帳號推出聊天機器人，以「QA小幫手」問答方式與民衆互動回饋癌症防治的相關訊息，包含大腸癌、乳癌、口腔癌及子宮頸癌等四癌症狀、檢查方式、篩檢醫療院所、治療方式、副作用、注意事項等。線上即時回復市民四癌篩檢問題，節省人力成本。
- (五) 106 年起運用衛生福利部國民健康署整合式篩檢系統暨臺北市政府資訊局Line投遞平臺，進行篩檢通知流程改善，建置個人化癌症篩檢通知模式以達精準投遞，有效避免重複通知並減省資源：減省重複通知時間及成本達 97.3% 及 11.2%、提升設籍臺北市正確通知率達 100%。107 年為能進一步分析市民癌症篩檢相關資料，全國首創以 API 方式介接國民健康署癌篩系統建置臺北市政府衛生局癌症篩檢資料倉儲系統，並定期自動化更新各項篩檢數據資料以即時訂定因應策略，有效改善通知流程，以確認市民健康問題及需求，聚焦顧客價值促進市民健康。



▲「婦出行動 防癌無懼」記者會
"Women's Action, Fearless Cancer Prevention" Press Conference



2. Accurate Cancer Screening Notification Procedure that Utilized Versatile Promotion

- (1) Screening invitations were given through "One-on-one Cancer Screening Inviting Vocal Reminding Notification Service", phone calls, text messages, E-posts and other ways to notify the citizens of cancer screening services.
- (2) Press conferences news releases and social networks such as Facebook Fan- Page "Humans of Taipei" and "Prof. Ko's Health Line @" are used to propagate cancer prevention messages in order to enhance citizens' understanding of screening.
- (3) To encouraged citizens participating the development of screening for children and the four major cancers screening incorporating the "Taipei Card - Health Service" feature to exchange "EasyCard" credits. In 2018, the tally for cancer screening points were redeem came to 9,102,900 points from a total of 90,307 persons who participated in relevant cancer screening.
- (4) Working together with the Department of Information Technology, the Department has utilized the latest ICT creating "Cancer Prevention Knowledge Assistant" Smart Service - a chat bot launched via Taipei City Government's official LINE account could interact and respond the information cancer prevention and treatment including four major cancers (colorectal cancer, breast cancer, oral cancer and cervical cancer) relevant symptoms, methods of inspection, locations of medical institutions that provide screening, available treatments, side effects of treatments, and other reminders. The service helps saving human resource costs through online and real-time response to citizens' inquiries on the screening of the four cancers.
- (5) Starting from 2017, the Department deployed the Health Promotion Administration's integrated screening system in conjunction with the Department of Information Technology's Line submission platform to improve upon existing screening notification process and construct personalized cancer screening notification model for more precise notification. By preventing repetitive notification, we will be able to save relevant resources. The actual statistics revealed a substantial 97.3% and 11.2% improvement in time and costs saved from repetitive notification, in addition to raising the accurate notification for citizens with registered address in Taipei City to 100%. In 2018, we have stepped up our services by analyzing cancer screening data and pioneered the construction of the Department's cancer screening data storage system by connecting to NHI's Cancer Screening System via API with scheduled and automatic updating of relevant screening data and statistics in order for the Department to formulate corresponding strategies. The system enables us to effectively improve our notification process by verifying various health issues and needs of citizens so that we can promote public health and focus on customer values.



▲「開心篩 粉樂送」婦癌篩檢記者會

"Happy Screening and Generous Gifts" Women Cancer Screening Press Conference



三、癌症篩檢及防治

- (一) 子宮頸癌篩檢：107 年 30 歲以上女性完成子宮頸抹片檢查計 25 萬 9,961 人，其中 430 人確診為子宮頸癌；另，3 年以上未作子宮頸抹片者完成 8 萬 3,390 人。
- (二) 乳癌篩檢：107 年接受乳房 X 光攝影計 13 萬 6,599 人，其中 652 人確診為乳癌。
- (三) 大腸癌篩檢：107 年糞便潛血篩檢計 16 萬 294 人，其中 235 人確診為大腸癌。
- (四) 口腔癌篩檢：107 年篩檢計 6 萬 9,826 人，其中 68 人確診為口腔癌。
- (五) 整合性預防保健服務：共辦理 103 場次，提供社區型及醫院型的免費成人健康檢查及四大癌症篩檢，計 1 萬 6,758 人參與，計服務 3 萬 4,020 人次。
- (六) 「癌症篩檢管理中心」進行高危險群篩檢困難個案催檢並完成篩檢計 3,586 人，並辦理篩檢陽性轉介困難個案追蹤，完成確診計 1,496 人，並榮獲「四癌追蹤效率王第一名」佳績。



▲ 臺北市榮獲四癌追蹤效率王第 1 名
Taipei won 1st Place Four Cancer Screening Follow-up Efficiency

四、原住民族保健

- (一) 107 年原住民參加醫院型老人健康檢查者計 663 人次；辦理原住民社區型健康檢查 12 場，計 485 人次參加；家戶健康服務訪視 7,637 人次。
- (二) 臺北市政府衛生局及所屬十二區健康服務中心辦理原住民健康促進諮詢講座共 12 場次，計 846 人參加；衛生局與臺北市政府原住民族事務委員會共同辦理「重陽敬老活動」，計 120 人參加。

醫院型老人健康檢查者計

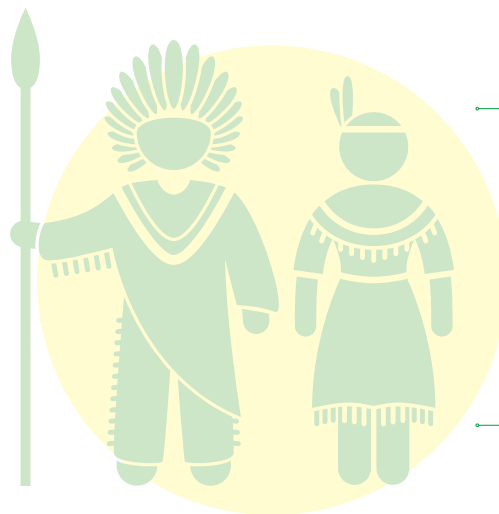
663 人次

原住民社區型健康檢查

12 場，**485** 人次參加

家戶健康服務訪視

7,637 人次



健康促進諮詢講座

12 場，**846** 人次參加

重陽敬老活動

120 人次參加

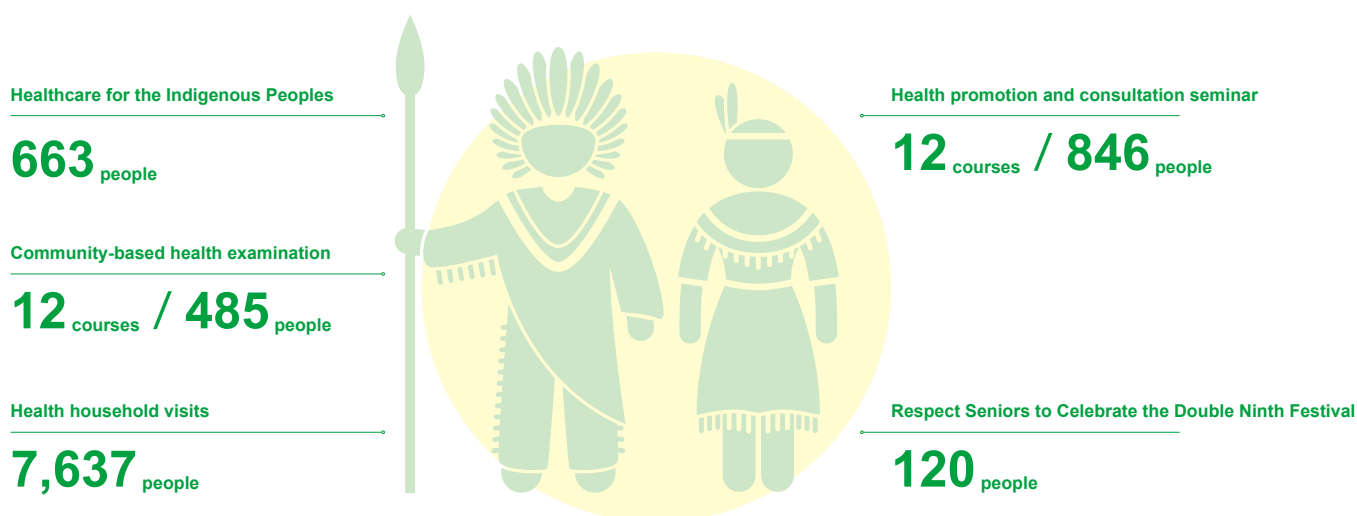


3. Prevention and Screening of Cancer

- (1) Cervical Cancer Screening: There were 259,961 women which over 30 years old have completed the pap-smear tests. 430 women were confirmed as cervical cancer. And, 83,390 of women who didn't take pap-smear tests for cervical cancer over 3 years has completed.
- (2) Breast Cancer Screening: In 2018, 136,599 persons underwent mammography examination, and 652 were confirmed as breast cancer.
- (3) Colorectal Cancer Screening: In 2018, 160,294 persons took stool occult blood screening, and 235 were confirmed as colorectal cancer.
- (4) Oral Cancer Screening: In 2018, 69,826 persons were screened, and 68 were confirmed as oral cancer.
- (5) Integrated of Prevention Health Service: we provided 103 courses of free health-checkup and the four major cancers screening in communities and hospitals. There were 16,758 participant and totally serviced 34,020 times.
- (6) The "Cancer Screening Management Center" has been involved in encouraging citizens in difficult cases of risk population to take relevant screening and successfully prompted 3,586 persons completed the screening. The Center also track of 1,496 difficult cases who were positive results after screening and ensure the case completing further examination. This has earned the award of "Best in Four Cancer Screening Follow-up Efficiency".

4. Healthcare for the Indigenous Peoples

- (1) We serviced 663 indigenous people in hospital-based health examination in 2018, and hold 12 courses of community-based health examination with 485 participants. In total 7,637 people were given health household visits.
- (2) The Department of Health and the 12 administrative district health centers of Taipei City government held 12 courses of health promotion and consultation seminar for Indigenous Peoples with 846 participants, and cooperated with Indigenous People Commission of Taipei City Government holding "Respect Seniors to Celebrate the Double Ninth Festival", with 120 participants.





第五節 菸害防制

一、稽查執法取締

- (一) 民國 107 年菸害防制案件稽查取締，共執行 7 萬 8,420 家次；裁處 790 件，裁罰金額新臺幣 2,017 萬 3,500 元整。
- (二) 結合臺北市政府教育局、學校及十二區健康服務中心辦理違規吸菸青少年戒菸教育，共完成 152 件。
- (三) 進行臺北市 240 家販賣菸品場所是否違規供應菸品予青少年之喬裝測試，合格 120 家，合格率為 50%。

二、多元戒菸服務

- (一) 辦理戒菸衛教人員初、進階訓練共 7 場，計 506 人參訓。
- (二) 結合臺北市 18 家醫院，辦理 40 班戒菸班，計 557 人參加，課後 1 個月之點戒菸成功率達 35.5%。
- (三) 107 年 9 月 10 日召開醫院戒菸服務聯繫會議，並持續監測合約醫事機構執行情形，臺北市 107 年二代戒菸服務 6 個月點成功率達 30.5%。
- (四) 結合醫療與社區資源，提供 1 萬 9,209 位吸菸者（含青少年）戒菸服務，服務涵蓋率達 6.6%。
- (五) 參與衛生福利部國民健康署「107 年全國保健Nudge（巧推）大賽」競賽，臺北市政府衛生局「戒菸拚健康」榮獲佳作。



▲ 市政會議獻獎—全國巧推大賽佳作
City Council Awards - National Nudge Competition Excellent Work



Section 5 Tobacco Hazards Control

1. Inspection of Violating Law on Tobacco

- (1) In 2018, total of 78,420 cases of tobacco control violations were investigated, and resulting in 790 violations and total fines amounting to NT\$ 20,173,500.
- (2) In collaboration with the Department of Education, schools and the 12 district health service centers, transacted the smoking cessation education session for underaged adolescents who have been smoking. The Department assisted with a total of 152 cases.
- (3) Undercover assessments were conducted on 240 stores selling tobacco products in Taipei City to determine if the stores would sell cigarettes to underaged teenagers. 120 of them passed the assessments, with a pass rate of 50%.

2. Diverse Smoking Cessation Services

- (1) A total of 7 sessions of elementary and intermediate training for smoking cessation instructors were held, with 506 participants.
- (2) The Department cooperated with 18 hospitals in Taipei City and transacted 40 smoking cessation courses 557 participants. Smoking cessation success rate after one month of the class reached 35.5%.
- (3) On September 10, 2018, held a smoking cessation service coordination meeting for hospitals in Taipei City and continued to monitor implementation status at contracted medical institutions. The 2nd generation smoking cessation service payment scheme in Taipei City for 2018 had a success rate of 30.5% after the class over six month period.
- (4) The Department combined medical and community resources to provide 19,209 smokers (including adolescents) with smoking cessation services. The service coverage rate was 6.6%.
- (5) Took part in the Health Promotion Administration Ministry of Health and Welfare's "2018 National Nudge Competition" and our submission of "Optimal Health through Smoking Cessation" has been chosen as an Excellent Work.





三、菸害防制宣導與教育

- (一) 加強向 3,532 家販菸業者，宣導不得販菸予青少年。
- (二) 107 年 3 月至 5 月配合衛生福利部國民健康署辦理「國中生、高中職生吸菸行為調查」，計完成 24 所樣本學校、2,359 名學生施測。
- (三) 辦理 1,226 場校園、社區、職場宣導，並透過電子平面媒體，宣導吸菸、二手菸、三手菸及電子煙對健康危害，鼓勵吸菸者及早成功戒菸。
- (四) 製作創意戒菸教材，如：拒菸護照、拒菸攻略、視障者菸害宣導點字手冊、聽障者菸害宣導手語影片等。



▲ 鼓勵計程車駕駛戒菸宣導記者會
Taxi Driver are Encouraged To Quit Smoking Press Conference

四、推廣與維護戶外無菸環境，保障民衆健康權益

- (一) 公告臺北市公車候車亭、臺北市和平實驗國民小學（含所附屬之「臺北和平籃球館」）及國立政治大學校門口周邊人行道，自 107 年 1 月 1 日起為全面禁止吸菸場所。
- (二) 公告臺北市松山區民生社區中心所屬之周邊戶外區域，自 107 年 4 月 1 日起為全面禁止吸菸場所。
- (三) 公告「碧山露營場」、「內溝溪生態展示館」、「內雙溪自然中心」、「貴子坑露營場暨水土保持教學園區」等 4 處場所之室外場所，自 107 年 4 月 1 日起為全面禁止吸菸場所，並由臺北市政府工務局大地工程處執行違規吸菸行為人稽查取締。
- (四) 公告國立臺北商業大學周邊人行道，自 107 年 5 月 1 日起為全面禁止吸菸場所。
- (五) 公告臺北市 135 條登山步道，自 107 年 12 月 31 日起為全面禁止吸菸場所，並由臺北市政府工務局大地工程處執行違規吸菸行為人稽查取締。
- (六) 辦理 19 場拒菸志工課程，計 320 人參訓；協助巡邏禁菸場所，計 1 萬 2,637 次。

3. Education and Promotional for Tobacco Control

- (1) Strengthen the promotion on 3,532 stores selling tobacco products were advised not to selling tobacco products to teenagers.
- (2) From March to May 2018, coordinated with the Health Promotion Administration, Ministry of Health and Welfare in holding "Global Youth Tobacco Survey". A total of 24 schools and 2,359 students were randomly surveyed.
- (3) Transacted 1,226 tobacco hazard control sessions of dissemination at campuses, communities and workplace premises and digital media, education citizens on the health hazards of smoking, second-hand, third-hand smoke and e-cigarette, encouraged smokers to quit smoking as soon as possible.
- (4) Produced creative teaching materials for smoking cessation, such as the No-Smoking Passport, No-Smoking Guide, tobacco hazard promotional material for citizens with the visually disabled and videos of tobacco hazard promotion in sign-language for those with hearing impairment.

4. Promotion and Maintaining a Tobacco-Free Outdoor Environment to Safeguard Citizens' Health

- (1) Since January 1, 2018, all bus shelters in Taipei City, the sidewalks surrounding the Heping Experimental Elementary School (including the peripheral Taipei Heping Basketball Gymnasium) and the sidewalks surrounding National Chengchi University were designated smoke-free zone.
- (2) Since April 1, 2018, the outdoor area in the perimeters of Songshan District Minsheng Community Center of Taipei City were designated smoke-free zone.
- (3) Since April 1, 2018, the outdoor areas of Bishan Campground, Taipei Neigousi Ecological Exhibition Hall, Neishuangxi Natural Center and Guizikeng Soil and Water Conservation Education Park were designated smoke-free zone. Enforcement shall be implemented by the Geotechnical Engineering Public Works Department, Taipei City Government to execute inspection of violating.
- (4) Since May 1, 2018, the surrounding sidewalks of National Taipei University of Business were designated smoke-free zone.
- (5) Since December 31, 2018, all 135 hiking trails in Taipei City were designated smoke free zone and enforcement shall be implemented by the Geotechnical Engineering Public Works Department, Taipei City Government to execute inspection of violating.
- (6) 19 non-smoking volunteer courses were held with 320 participants. These volunteers helped inspection smoke free zone for a total of 12,637 times.



▲ 公告臺北市登山步道為禁菸場所
Taipei Hiking Trail Smoking Were Designated Smoke-Free Zone



第二章 健康城市

第一節 營造健康生活環境

一、社區健康營造

招募與輔導 58 個單位，建立專家輔導機制，推動社區健康營造，辦理輔導會議暨實地訪查計 42 場次，社區健康營造教育訓練與觀摩 3 場次計 232 人參加，另結合健康飲食、規律運動、長者防跌宣導等健康促進議題，舉辦 2,996 場活動，計 7 萬 8,376 人次參與。

二、職場健康促進

連結專業團隊合作網絡推動職場健康促進，於職場辦理各項健康促進活動，民國 107 年臺北市計 407 家職場通過衛生福利部國民健康署健康職場認證方案，另 106 年及 107 年連續榮獲衛生福利部國民健康署地方政府衛生局推動健康職場優等獎。

三、健康體位管理

- (一) 委託臺北市 16 家醫療院所及十二區健康服務中心辦理健康體位控制活動，計 2 萬 4,528 人參加，減重 5 萬 6,757 公斤；結合專業營養師深入所在社區舉辦健康飲食活動，計 80 場，共 2,312 人次參與。
- (二) 結合社區減重班、健走隊、減重門診及營養教育點等資源，提供轉介及衛教諮詢等服務，辦理計 221 場健康飲食宣導活動，共 1 萬 8,218 人參與，並成立 86 隊健走隊，計 29 萬 2,676 人參與健走活動。



▲ 結合跨世代推動健康飲食
Cross-generation Healthy Eating Promotion

四、長者健康促進

- (一) 辦理「長者活躍老化競賽活動」計 118 隊共 5,711 人次長者參與，並榮獲全國競賽活力舞台組金牌、銅牌及活力律動組最佳創意獎等 3 項獎項。
- (二) 辦理為期 12 週「動手動腳動動腦」課程，內容含規律運動、健康飲食、認知與情緒支持、口腔保健及慢性病預防等議題，計 3,272 人次長者參與。
- (三) 為完備社區推動專業人員對運動、認知及健康老化等重要議題知能，結合跨領域合作培訓師資，辦理 2 梯次培訓課程計 186 人完訓。



Chapter 2 Healthy City

Section 1 Creation of a Health Living Environment

1. Creation of Health Communities

The Department has recruited and advised 58 units in the establishment of an expert guidance mechanism for the promotion of healthy communities. A total of 42 sessions of guidance meeting and field survey were carried out, along with 3 sessions of community healthy promotion training and demonstrations for a total of 232 participants. Not only that, holding total 2,996 events with relevant topics such as healthy diet, regular exercise, fall prevention for the elderly attracted 78,376 participants.

2. Facilitation of Healthy Workplaces

By collaborating with a network of professional teams, the Department has promoted healthy workplaces by implementing various activities of healthy promotion at different workplaces. In 2018, a total of 407 workplace environments in Taipei City received the Healthy Workplace Recognition Health Promotion Label from the Health Promotion Administration, and the Department received the Outstanding Local Health Department in Healthy Workplace Promotion from the Health Promotion Administration in both 2017 and 2018.

3. Healthy Body Management

- (1) The Department commissioned 16 medical institutions and the 12 district health centers to organize events to promote healthy weight and fitness. These events attracted a total of 24,528 participants and get rid of 56,757 kg in weight. These events were held 80 healthy diet workshops hosted by professional nutritionists at various communities, and attended by 2,312 persons.
- (2) By integrating the resources of community weight controlling programs, walking teams, weight controlling clinics and nutrition education stations, the Department has provided health consultation services. Not only that, we held 221 events of healthy diet campaign with for 18,218 participants and established of 86 walking teams, with 292,676 members taking part in various walking activities.

4. Elderly Health Promotion

- (1) The Department organized the “Active Aging and Vitality Show Competition”, which attracted 118 teams with 5,711 senior participants. Selected teams from Taipei City then join the National Young and Vigorous Stage Competition and won the gold medal, bronze medal and award for best creativity in the “rhythm with vigor category”.
- (2) We also held a series of courses over 12-week titled “Move Your Limbs and Exercise Your Brain” with contents covering regular exercises, healthy diet awareness and emotional support, oral care, prevention of chronic illnesses and so forth. A total of 3,272 senior citizens took part in the event.
- (3) To help relevant personnel in communities to cultivate knowledge and competence in key topics such as physical exercises, awareness and healthy aging, the Department has initiated interdisciplinary collaboration in the education of trainers. A total of 186 participants completed in 2 batch of training programs.



五、社區營養推廣

- (一) 成立臺北市「社區營養推廣中心」，發展社區營養教育資源，培訓社區營養實務推動人員，輔導共餐據點製備健康餐食，提供市民個別或團體營養教育等營養相關服務。
- (二) 擴大增設至 6 個（信義、萬華、北投、南港、內湖、文山）社區營養衛生教育示範點，由健康服務中心結合專業營養師走入社區服務，依據社區特色辦理客製化課程計 91 堂，運用多元宣傳管道辦理健康飲食推廣活動 221 場次，共計 1 萬 8,218 人參與，將健康飲食扎根於社區日常生活。

第二節 健康城市及高齡友善城市

一、健康城市

推動健康城市、社區安全及高齡友善之跨域合作機制，召開 15 次會議，計 556 人次與會；為提升健康城市推動人員知能及專業性，辦理 2 場培力訓練、4 場工作坊及 1 場健康城市研討會，計 529 人次參與，並以臺北市政府策略地圖為基礎，訂定臺北市健康城市 5 大主題、44 項策略目標、67 項指標，民國 107 年指標達成率 86.6%、進步率 64.2%，營造臺北市成為「以人為本」的宜居城市，改善市民生活品質，107 年執行成效卓越，西太平洋健康城市外賓前來拜會市長。



▲ 健康城市青年論壇
Healthy City Youth Forum



▲ 西太平洋健康城市外賓拜會臺北市
Member of the Alliance for Healthy Cities Meet in Taipei

二、高齡友善城市

臺北市政府透過跨局處、跨領域及輔導專家等組成工作小組、召開 3 場專家學者共識會議，並訂定 24 項高齡友善城市監測指標，以臺北市社區為基礎，整合產、官、學、民之相關單位資源建立支持性環境。並於康健面向鼓勵醫療院所與十二區健康服務中心結合社區資源辦理長者健康促進相關課程及活動，計 12 萬 3,241 人次參加，並榮獲衛生福利部國民健康署辦理「107 年臺灣健康城市暨高齡友善城市獎項評選」中 10 項獎項。



5. Promotion of Nutrition Knowledge in Communities

- (1) The Department established the “Community Nutrition Promotion Center” in Taipei City as a means for the development of resources for nutritional education in communities by training personnel to take charge of nutrition related promotions in various communities and consult the congregate meal service station in the preparation of healthy meal and offer citizen with individual/group nutrition education.
- (2) We have expanded the scope of the Center’s service by setting up community nutrition education demonstration spots at six districts (Xinyi, Wanhua, Beitou, Nangang, Neihu and Wenshan). Through the collaboration of Health Service Centers and nutritionists, the Department was able to reach out to the communities and serve their members by organizing a total of 91 customized courses in accordance with the unique characteristics of each community. In addition, we also organized 221 sessions of healthy eating and diet promotion event for a total of 18,218 persons so as to ensure that the practice of healthy diet can take root in the regular lives of community residents.

Section 2 Healthy City and Elderly Friendly City

1. Healthy City

The Department has been promoting a cross-domain collaborating mechanism to achieve the goals of healthy city, community safety and elderly friendliness. To this end, the Department has held 15 meetings, attended with 556 participants. In order to boost the competence and expertise of personnel involved in the promotion of healthy city, we have organized 2 empowerment training, 4 workshops and 1 Healthy City Symposium for a total of 529 participants. With Taipei City Government’s Strategy Map as the basic framework, the Department has established 5 major themes, 44 strategic objectives and 67 indicators in the transformation of Taipei City into a healthy metropolis. In 2018, our index achievement rate came to 86.6%, with an improvement rate of 64.2%. We are committed to turning Taipei City into a “human-oriented” livable place by improving the quality of citizens’ lives. For our exceptional performance and results achieved in 2018, distinguished guests from the Global Conference of the Alliance for Healthy Cities have come to visit the Mayor.

2. Elderly Friendly City

Taipei City Government has assembled a special task force consisting of members from different departments, organizations and experts from different domains and held 3 Expert Consensus Meetings to establish 24 monitoring indicators for elderly friendly city with communities in Taipei City as the basic units to steer the integration of resources from relevant industries, government bodies, academia and private organizations towards the creation of a supportive environment. With regards to common health, the Department also urged medical institutions and the 12 district health service centers to integrate relevant community resources to organize health promotion related courses and activities for senior citizens. A total of 123,241 seniors took part in these activities. Taipei City Government won 10 awards in the “2018 Healthy Cities and Age-Friendly Cities Award” held by the Health Promotion Administration.



第三章 心理健康促進

第一節 精神醫療照護

- 一、精神病人照顧須結合醫療院所與社區資源，提供完整性、延續性照顧，以降低精神病人輾轉於醫院及家中；臺北市政府衛生局透由 12 區健康服務中心進行社區精神病人追蹤訪視，除銜接醫院端出院準備服務，也提供醫療照護及福利資源等垂直平行轉介，並跨局處合作，針對主要照顧者辦理社區化教育課程，強化其對精神病的認識、照顧及善於利用醫療及社會福利資源，期使精神病人及主要照顧者在社區中有更好的生活品質，進而減少社會成本；民國 107 年追蹤照護人數計 1 萬 7,569 人，訪視服務共計 10 萬 8,112 人次。
- 二、為強化社區病人緊急送醫服務網絡，臺北市政府衛生局委請臺北市立聯合醫院松德院區及三軍總醫院北投分院提供「社區緊急個案醫療小組」出勤，由精神醫療專業人員到社區中提供專業的評估與協助社區處理個案；民國 107 年共計出勤服務 638 人次。
- 三、臺北市政府為關懷精神病人之身心健康與復健狀況，民國 107 年結合體育局、臺北市立聯合醫院松德院區、臺北市立師範大學等單位共同辦理第五屆青鳥盃康復之友運動會，當日共計約 600 名精神康復之友參與盛會。



▲ 社區緊急醫療個案小組出勤
Community Emergency Medical Case Team Attendance



Chapter 3 Promotion of Mental Health

Section 1 Mental Health Care

1. Any care for the psychotic disorder needs to be integrated with the resources of medical institutions and communities to maintain integrity and continuity, so as to reduce patients travel between hospitals and homes. Through health centers in the 12 districts of Taipei City, the Department conducted follow-up visits to psychiatric patients in communities. In addition to the hospital discharge preparation services, vertical or parallel referrals of medical care and welfare resources are also provided. With cross-department/office cooperation, community education courses are designed for primary caretakers to enhance their knowledge about mental disorders, patient care and utilization of medical and social welfare sources. The Department expects psychiatric patients and primary caretakers to have a better quality of their lives in communities and to further reduce social costs. In 2018, a total of 17,569 persons received follow-up care, and visits were paid to 108,112 persons.
2. To strengthen the emergency hospital delivery service network for community patients, the Department commissioned the Songde Branch of Taipei City Hospital and the Beitou Branch of Tri-Service General Hospital to dispatch “Community Emergency Case Medical Teams”. Mental health professionals provide professional evaluation and assistance to the community in handling individual cases. In 2018, a total of 638 persons receive the services.
3. The Taipei City Government cares about the physical and mental health and status of rehabilitation of psychiatric patients. In 2018, the Department cooperated with the Department of Sports, the Songde Branch of Taipei City Hospital, the National Taiwan Normal University and the Life Choices Association in organizing the 5th Bluebird Cup Games for Patients Under Rehabilitation. Approximately 600 participants in psychiatric rehabilitation took part in the event.



▲ 第五屆青鳥盃康復之友運動會
5th Bluebird Cup Games for Patients Under Rehabilitation



第二節 社區心理服務

一、社區心理諮商服務：

為加強宣導心理衛生預防理念，提供民衆便捷之心理資源，使民衆熟悉社區化的心理衛生求助管道，並接納運用，避免心理困擾問題進一步惡化及醫療費用的浪費，臺北市政府衛生局自民國 94 年 7 月起結合臺北市立聯合醫院院外門診部，首創「社區心理諮商服務」，迄今已於 12 個行政區及社區心理衛生中心共 13 處附設門診部，每週提供民衆 36 診次之心理諮商服務，107 年共服務 8,459 人次。

二、建構在地化社區心理衛生服務網絡：

結合民間團體、醫療院所暨大專院校等，落實社區化心理衛生服務之推動。民國 107 年委託李政洋身心診所、台灣基督長老教會馬偕醫療財團法人馬偕紀念醫院、中崙諮商中心心理諮商所及國立臺北護理健康大學等 4 家民間團體，分區提供臺北市高風險個案個別心理輔導、團體輔導、外展服務、電話關懷、專業人員訓練及辦理相關研討會等社區心理衛生服務，其族群包括憂鬱症高關懷個案、嚴重情緒困擾個案、緊急災難心理衛生高關懷個案及社區高關懷個案等，並視各委辦單位專長提供特色服務，亦以外展服務方式，由專業人員至需求個案居住地訪視，協助社區有需求個案能進而主動走出社區，共服務 6,116 人次。



Section 2 Community Psychological Consultation Services

1. Community Psychological Counseling Services:

Since July 2005, the Department worked with the outpatient clinics of Taipei City Hospital to establish the first “Community Psychological Counseling Service” with the purposes of improving awareness for the prevention of mental health issues, providing the public with convenient access to psychological healthcare resources, improving public familiarity, acceptance and utilization of community based mental health support channels, preventing the worsening of psychological problems, and avoiding wasteful expenses of medical fees. To date, a total of 13 outpatient clinics were established in the 12 administrative districts and the Taipei Community Mental Health Center, providing psychological counseling services 36 times a weekly basis and served a total of 8,459 persons in 2018.

2. Construction of a Localized Community Mental Health Service Network:

The Department cooperated with civil groups, medical institutions and universities in implementing the promotion of community mental health services. The Department commissioned four civil groups, namely Lee's Psychiatric Clinic, MacKay Memorial Hospital, the psychological counseling institute of Zhonglun Counseling Center and the National Taipei University of Nursing and Health Sciences in providing community mental health services for high-risk cases in different districts of Taipei City, such as individual psychological counseling, group consultations, outreach services, telephone care, professional staff training, and holding related symposiums. The populations included high-risk depression cases, cases with severe emotional issues, high-risk emergency disaster mental health cases, and high-risk cases in the community. The agencies provided featured services according to their specialty. They also provide outreach services, in which professional staff will visit cases in demand at their residence and assist them to walk out of the community. The services were provided to 6,116 persons.



三、心理健康促進：

臺北市政府衛生局多年來持續結合臺北市政府各單位之資源及非政府組織，共同推動市民心理健康，並依據場域特性分別針對校園、職場、社區（含特殊族群對象）及近年關注之長者族群，發展在地多元化之心理健康促進活動或方案，另搭配國際心理健康日於每年 10 月規劃大型宣導活動，盼能增進市民因應生活壓力之調適能力，協助潛在高危險群民眾學習檢視自我心理衛生狀態，適時尋求資源。民國 107 年度在校園兒少心理健康促進辦理講座及培訓 20 場，共 768 人次參與；職場心理健康促進辦理講座及培訓課程 56 場次，共 5,545 人次參與；社區心理健康促進則辦理 25 場講座活動，共 2,945 人次參與；推動長者心理健康促進辦理 76 場講座活動，共 2,221 人次參與。107 年 9 月至 10 月邀集 17 個市府局處及民間單位，搭配國際心理健康日青少年心理健康之主題，辦理心理健康月「Just Youth 零設限！探索心可能」系列宣導活動，共辦理 35 場次、1,971 人次參與。



▲ 職場心理健康促進講座
Workplace Mental Health Promotion Seminar



▲ 長者社區據點心理健康宣導活動
Elderly Community Base Mental Health Promotion Event

3. Promotion of Mental Health:

For years, the Department has continued to promote mental health for citizens by combining the resources from every department/office of the Taipei City Government and NGOs. Based on the characteristics of the locations, the Department has developed localized and diverse event plans or projects on mental health promotion for schools, workplaces, communities (including special groups) and seniors who have received care in recent years. In October every year, large promotional events are held to celebrate the World Mental Health Day, with the aim to enhance citizens' abilities to adapt to stress in their lives and help citizens with a potentially high risk learn how to examine their mental health conditions and seek resources at the appropriate time. In 2018, 20 sessions of seminar and training on promotion of children and adolescent mental health on campus were held, with 768 participants. 56 sessions of seminar and training on promotion of workplace mental health were held, with 5,545 participants. 25 sessions of seminar on promotion of community mental health were held, with 2,945 participants; 76 sessions of seminar on promotion of mental health for seniors were held, with 2,221 participants. From September to October 2018, the Department invited 17 Taipei City Government departments and relevant private organizations to organize a series of promotional events under the theme of "Just Youth Without Limit - Explore the Possibilities of the Mind" in conjunction with the World Mental Health Day and the issue of mental health for adolescents. A total of 35 sessions were held for 1,971 participants.



▲ 「Just Youth 零設限！」記者會
"Just Youth Without Limit!" Press Conference



第三節 自殺防治

為有效整合臺北市自殺防治策略與資源，於民國 98 年成立臺北市政府自殺防治中心，下設「規劃執行」與「研究宣導」兩組，透過綜合規劃、個案整合處理、特殊個案通報、緊急處置、教育宣導、環境防治、知能訓練及研究發展等進行各項自殺防治工作。

一、強化臺北市之關懷訪視服務

- (一) 民國 107 年接獲自殺企圖暨高危險個案通報 6,885 案次，包括自殺企圖通報個案 3,112 案次、社區高危險自殺個案 3,187 案次，以及外縣市個案 589 案次，並委託民間團體辦理自殺防治危險分級化服務計畫，拓展自殺中高危險個案之社區服務共 900 案次。
- (二) 107 年臺北市自殺防治諮詢專線共接獲 400 案次疑似自殺企圖個案電話，其中有 9 案次為自殺高危險且有立即生命危險，經啟動警消協助與派員緊急出勤後，均成功挽救自殺危險邊緣民眾。

圖 2 歷年臺北市自殺企圖暨高危險者通報案件量



二、建置跨局處資源整合平台

辦理跨局處業務聯繫會報 4 場次，由臺北市政府各局處就自身權管業務規劃自殺風險個案之服務機制並進行宣導，以強化臺北市政府自殺防治之效能，並由各局處加強宣導同仁對於報導自殺新聞的「六不」與「六要」原則，促進各局處建立良好的媒體溝通管道以強化臺北市政府自殺防治之認知防治策略。



▲ 自殺防治中心業務聯繫會報
Suicide Prevention Center Operating Communication Report



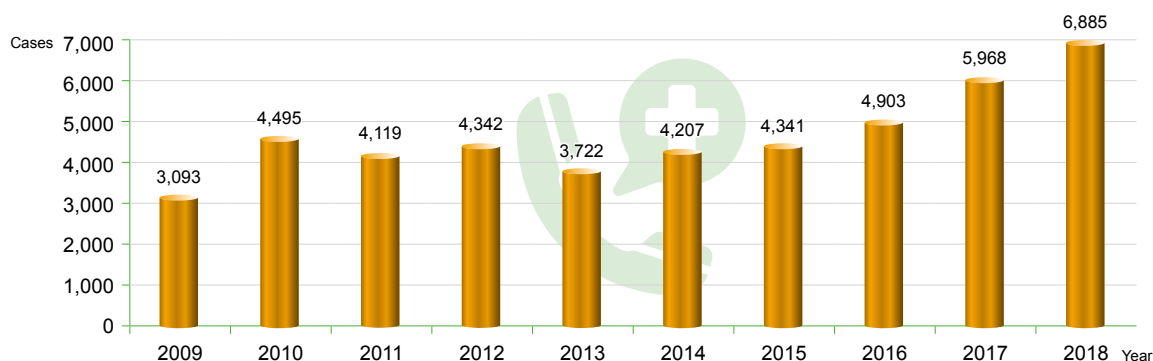
Section 3 Suicide Prevention

The Department established the Taipei City Government Suicide Prevention Center in 2009 that consists of 2 divisions of “planning and implementation” and “research and education” in order to effectively integrate suicide prevention strategies and resources of Taipei City. The Suicide Prevention Center is carried out through comprehensive planning, case integration and management, special case reporting, emergency care, education and training, environmental control, skills training, research and development, etc.

1. Improving Care-Visits in Taipei

- (1) In 2018, the Department received 6,885 notifications of high-risk suicide attempt cases, including 3,112 cases that attempted to commit suicide, 3,187 high-risk suicide cases in communities, and 589 cases in other municipalities, the Department also commissioned civil groups to implement the Suicide Prevention Risk Ranking Project and expanded community services to 900 cases of medium and high-risk suicides.
- (2) In 2018, the Taipei City Consultation Hotline received 400 calls of suspected suicide attempt and 9 of which were in high-risk of committing suicide with immediate life danger. After launching the assistance of the police and emergency attendance, the people who were on the verge of committing suicide were all successfully rescued.

Figure 2 Number of Reported Cases for Suicide Attempts and High-Risk Individuals in Taipei City throughout the Years



2. Establishment of a Cross-Departmental Resource Integration Platform

4 cross-departmental communication meetings were held for the departments/offices of the Taipei City Government to design and promote service systems for cases involving risk of suicide within their respective responsibilities, with the aim to enhance the effectiveness of suicide prevention in Taipei City. The departments/offices were directed to increase their efforts in raising employees' awareness of the “6 to do” and “6 not to do” principles regarding news coverage of suicide, establish channels that ensure smooth communication with the media, and strengthen the awareness strategies of the Taipei City Government for suicide prevention.



三、自殺防治守門員訓練多元化

自殺防治守門員訓練除臺北市政府及民間各單位外，並連結國立教育電台及臺北廣播電臺共同規劃推動自殺防治工作宣導、建立與媒體溝通的管道，營造共同預防自殺的意識、鼓勵負責任的報導方式。民國 107 年共辦理 126 場次自殺防治守門員訓練，共計有 12,079 人次參與。



▲ 自殺守門人課程
Suicide Gatekeeper Course

四、辦理自殺防治研討會及大型宣導活動

民國 107 年邀請專家學者、實務工作者及資源單位進行長者生理、心理及社會需求及自殺防治議題之研討與交流，以增進實務工作之相關知識與處遇交流，促進臺北市資源單位對於長者需求及自殺防治之交流與了解。107 年辦理「臺港長者自殺議題之現況與挑戰—自殺防治研討會」計 192 人次參與；另針對世界自殺防治日配合衛生福利部衛教主軸巡迴宣導活動「健康滿分同學會」，於 107 年 9 月 8 日（星期六）下午 3 時至 5 時假臺北市信義區香堤廣場辦理，結合臺北市政府各局處及民間團體等單位，共同宣導「自殺防治人人共守」（Working Together to Prevent Suicide.）及「1 問 2 應 3 轉介——人人都是自殺防治守門人」衛教觀念，並透過多元宣導通路，讓民衆能夠對於自殺風險族群做出適當的回應，並尋求適當資源協助或轉介，參與人數達 2,109 人次。



▲ 自殺防治研討會
Suicide Prevention Seminar

3. Diversification of Training for Front-Line Suicide Prevention Workers

Regarding the training of front-line suicide prevention workers, besides Taipei City Government and civil organizations, it has also cooperated with the National Education Radio and the Taipei Broadcasting Station in jointly organizing and promoting suicide prevention operations, establishing communication channels with the media, building up the common consciousness of suicide prevention, and encouraging responsible news coverage. In 2018, 126 sessions of front-line suicide prevention workers training were held, with a total of 12,079 persons participating in them.

4. Organizing Suicide Prevention Seminars and Large-Scale Promotion Events

In 2018, the Department invited experts, scholars, practitioners and relevant units with resources to take part in the discussion and exchange on the issues of physiological/mental/social needs of seniors and suicide prevention in an effort to share relevant knowledge from practical work and exchange experiences from actual encounters so that relevant units with resources will gain better understanding on the needs of seniors and the tasks of suicide prevention. In 2018, the Department organized and held “Current Status of Suicide and Relevant Challenges in Taiwan/Hong Kong - Suicide Prevention Seminar”, with 192 participants taking part. In conjunction with the World Suicide Prevention Day and coupled with the “Class Reunion for Optimal Health” health education promotion tour conducted by the Ministry of Health and Welfare, the Department collaborated with other departments and relevant private organizations by jointly promoting the concept of “Working Together to Prevent Suicide” and “Ask, Respond, Refer - You too can be a keeper of suicide prevention” between 3-5 PM on September 8 (Saturday), 2018 at Xiangti Square in Xinyi District along with diverse channels of dissemination to educate the general public to act and respond in the appropriate manner in dealing with those exposed to the risks of suicide while seeking relevant assistance and referral. A total of 2,109 participants took part in the event.



▲ 自殺防治日宣導活動
Suicide Prevention Day Promotional Event



第四節 性侵害防治

性侵害案件之特殊性及處理層面廣泛，非單一機關所能解決，需要警察介入、醫療服務、社工處遇、教育協助及司法偵辦等相關單位共同執行，故臺北市對於設籍且實際居住臺北市之性侵害被害人及其家屬，進行性侵害案件一站式及整合性團隊之被害人服務。

臺北市透過團隊分工合作提供被害人及其家屬適切的服務，並減少造成被害人的二度傷害，持續以「專責處理、全程服務」為核心概念，結合以被害人為中心之重複陳述精神，幫助性侵害被害人克服報案、驗傷診療、對刑事司法之恐懼、避免司法程序對被害人可能造成的二度傷害，及提供被害人心理輔導、復健治療、律師諮詢及相關費用補助等諮詢及協助。

臺北市設有 6 處性侵害驗傷採證一站式服務據點，包含臺北市立聯合醫院忠孝、和平婦幼、中興、陽明、仁愛院區及臺北市立萬芳醫院，若不幸遭受性侵害，可自行前往或由警方、社工陪同前往上述據點進行驗傷，醫院即會啟動「一站式服務流程」，提供下列協助：

一、優先處理醫療問題：

被害人至醫院急診室就醫，給予優先處理。

二、獨立溫馨的診療與會談空間：

醫院提供專屬、隱密且溫馨會談室及診療空間，以維護被害人隱私。

三、專業人員陪伴：

社工或護理人員全程陪伴，隨時提供必要之協助。

四、驗傷採證及診斷書開立：

醫院徵求被害人同意，簽署同意書後協助相關證物採集及驗傷，作為其提出告訴的證物；醫師對於診療結果，會協助開立驗傷診斷書，以維護被害人權益。

五、筆錄製作服務：

被害人可於醫院的會談室進行筆錄製作，由專責醫護、社工及檢警人員全程陪同，減少其舟車勞頓的困擾，並可獲得安全、信任、隱密之團隊的協助。



▲ 一站式驗傷採證空間
One-Stop Inspection and Test Space



▲ 一站式溫馨會談空間
One-Stop Heartfelt Consultation Space



Section 4 Prevention of Sexual Assault

Cases of sexual assault are unique and involve a broad range of issues that cannot be handled by any agency on its own. Such cases require a combination of police intervention, medical services, social work treatment, educational help and judicial investigation. Hence, for victims of sexual assault and their family members residing in Taipei City with registered address in Taipei City as well, Taipei City Government offers “one-stop, integrated and team-based services” for said victims.

The Taipei City Government seeks to provide better and more suitable services to victims and their family members through teamwork and division of labor while mitigating secondary victimization. Following the core principles of “ad hoc treatment” and “one-stop service”, and with a victim-centered approach that reduces the need for repeated statements, Taipei City Government strives to help victims overcome their fears of reporting to the police, receiving injury diagnosis and involving in the criminal investigation. The aim is to prevent secondary victimization that is likely to be caused by judicial processes and to provide victims with consultation services and assistance including psychological counseling, rehabilitation, legal advice, and subsidization of costs incurred.

There are currently 6 service locations for victims of sexual assault to diagnose injuries and collect evidence. The locations are situated in the Zhongxiao, Heping Fuyou, Zhongxing, Yanming and Renai Branches of the Taipei City Hospital and the Taipei Municipal Wangfan Hospital. In the unfortunate event of sexual assault, the victims may visit these one-stop service locations for injury diagnosis by themselves or in the company of police officers and social workers. The one-stop services include the following kinds of assistance:

1. Prioritizing victim's treatment:

Victims will be given priority when seeking medical assistance at any hospital's ER.

2. Secluded, pleasant physical space for diagnosis and interview:

Hospitals provide exclusive, secluded and pleasantly furnished space for diagnosis and interview to protect the privacy of victims.

3. Companionship from trained personnel:

Victims can request for the companionship of social worker/nurse at all times to provide any required assistance at any time.

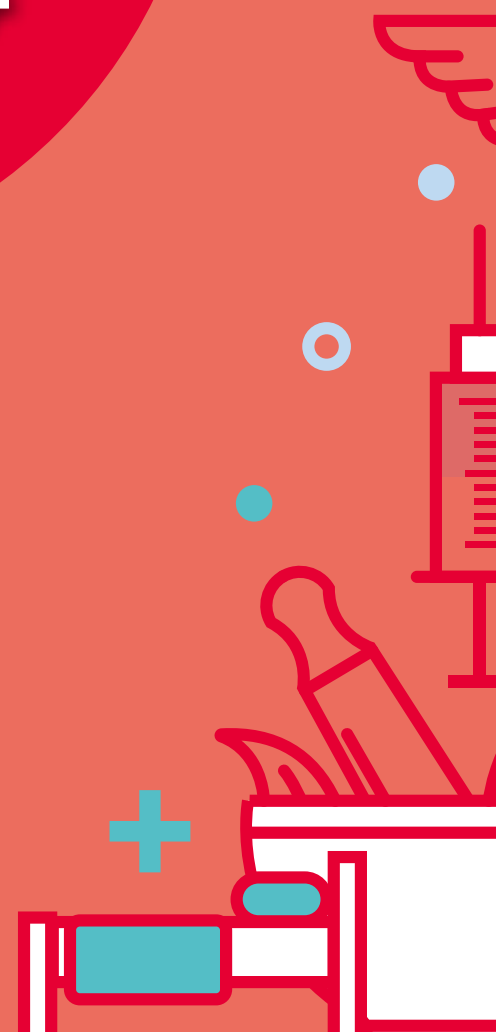
4. Injury Diagnosis, Evidence Collection and Certificate Issuance:

After the victims have given their consent and signed the consent forms, they will assist hospitals in collecting related evidence and diagnosing injuries for the purpose of litigation. In accordance with the results of diagnosis, injury certificates will be issued by the doctors to protect the victims' rights.

5. Taking Written Statements:

Victims can have their written statements taken in hospital's interview rooms while accompanied by medical personnel, police officers and social workers throughout the process so that the victims can be spared from the hassles of having to visit multiple places while receiving safe, trustworthy, private and team-based assistance.

第四篇
精進
防疫減毒



4

Improve Disease and Drug Prevention





第四篇 精進防疫減毒

第一章 預防接種

第一節 嬰幼兒常規疫苗接種

預防接種是預防傳染病的有效途徑，配合衛生福利部疾病管制署政策，持續辦理嬰幼兒各項常規預防接種，接種率平均達 95%，符合群體免疫效果並能保障嬰幼兒的健康。

為提升e化之便民服務，於民國 101 年 3 月 8 日起正式啟用「嬰幼兒預防接種與保健資訊簡訊系統」之新措施，透過簡訊及電子郵件提醒家長，按時帶家中 3 歲以下（含）幼兒接種疫苗，截至 107 年止，計 19 萬 3,105 人受惠。

第二節 輪狀病毒疫苗接種

輪狀病毒感染所造成之病毒性腸胃炎是全球幼兒嚴重腹瀉最常見的原因之一，為減少醫療花費、降低照顧成本及提升市民生活品質，臺北市自民國 106 年 4 月 5 日開始實施輪狀病毒口服疫苗補助計畫，依市民家庭狀況分級補助輪狀病毒疫苗接種，共同防禦輪狀病毒對小寶貝的威脅。



▲ 臺北市的小寶貝口服輪狀病毒疫苗
Taipei Baby Oral Rotavirus Vaccine

自民國 107 年 1 月 1 日至 107 年 12 月 31 日止，共補助 2 萬 1,893 人，接種 4 萬 1,459 劑次，補助金額計 3,630 萬 1,774 元，接種率達 75.7%。

第三節 流感疫苗接種

流感可透過飛沫傳染，散播力強，全球曾發生幾次流感大流行且造成衆多人死亡，對人類健康具相當大威脅，預防流感最有效的方法就是按時接種流感疫苗。

配合衛生福利部疾病管制署政策，積極推廣高危險群接種流感疫苗，減少流感病毒傳播、避免罹患流感；民國 107 年流感疫苗總計接種 57 萬 5,064 劑，成人 54 萬 1,242 劑，幼兒 3 萬 3,822 劑，疫苗涵蓋率達 21.54%。



▲ 社區流感疫苗設站接種
Community Flu Vaccine Station Vaccination



▲ 流感疫苗開打日記者會
Influenza Vaccine Opening Day Press Conference



Part 4 Improve Disease and Drug Prevention

Chapter 1 Immunization

Section 1 Standard Immunization for Infants and Children

Immunization has remained an effective means for the prevention of communicable diseases. In line with the policy of the Centers for Disease Control, Ministry of Health and Welfare, standard immunizations for infants and children have continued. The average immunization rate was about 95%, achieving the herd immunity effect while safeguarding the health of infants and children.

To improve the digitalized convenience services, the new measure of “Immunization and Healthcare Information Text Message System for Infants and Children” was officially launched on March 8, 2012. Through text message and e-mail services, it reminded parents to take their children below the age of 3 to undertake regular vaccination. By the end of 2018, a total of 193,105 people benefited from this service.

Section 2 Rotavirus Vaccination

For children around the world, one of the most common causes of severe diarrhea is viral gastroenteritis resulting from rotavirus infection. To reduce medical expenses, lower the costs of care and improve the quality of citizens' lives, the Taipei City Government began to implement the subsidy plan for oral vaccination against rotavirus on April 5, 2017. The citizens are divided into categories of different levels based on the conditions of their families and receive subsidies for rotavirus vaccination accordingly, with the aim to protect their children from the threat of rotavirus.

From January 1 to December 31, 2018, 21,893 persons received subsidies. The number of doses of vaccines given was 41,459, and the amount of subsidies was NT\$36,301,774. The vaccination rate was 75.7%.

Section 3 Influenza Vaccination

Influenza is a highly contagious disease that could be transmitted via droplets. Global flu pandemics have occurred on several occasions and caused large number of casualties, and therefore poses a grave risk to human health. The most effective way of preventing flu is to receive influenza vaccinations on time.

In line with the policy of the Ministry of Health and Welfare's Centers for Disease Control, high-risk populations are encouraged to receive flu vaccinations to limit the spread of flu viruses and avoid contracting flu. In 2018, the total number of doses of flu vaccines given was 575,064. Among them, 541,242 were given to adults, and 33,822 were given to children. The immunization coverage rate was 21.54%.



第四節 肺炎鏈球菌疫苗接種

民國 106 年 10 月 1 日起，擴大長者肺炎鏈球菌疫苗接種，凡設籍臺北市 65 歲以上且從未接種肺炎鏈球菌疫苗的市民，可至臺北市 209 家合約醫療院所，免費施打肺炎鏈球菌疫苗，疫苗免費。

民國 107 年，臺北市 65 至 74 歲長者計 2 萬 3,029 人接種肺炎鏈球菌疫苗，累計接種率為 22.26%；臺北市 75 歲以上長者肺炎鏈球菌疫苗施打人數為 9,057 人，自民國 97 年開辦以來，累計 13 萬 2,129 人接種。



▲ 製作數位有線電視託播廣告
Create Digital Cable TV Broadcast Ads



▲ 社區肺炎鏈球菌疫苗宣導
Promotion of Community Pneumococcal Vaccine

第二章 傳染病監測網絡平臺

第一節 法定傳染病通報

醫療院所依《傳染病防治法》規定，進行法定傳染病疑似個案通報，臺北市政府衛生局針對居住於臺北市之個案進行疫情調查與防疫處置，以監控臺北市傳染病流行趨勢，並據以辦理相關防治措施，截至民國 107 年 12 月 31 日，共 4,322 個通報病例，其中 3,222 個確定病例。

第二節 學校傳染病通報

為掌握學校、幼托機構等人口密集場所之疫情通報時效，同時採取即時之處置，由臺北市政府衛生局、教育局及社會局共同建置「臺北市學校傳染病通報系統」之資訊平臺，自民國 99 年 1 月 1 日啟用，藉此進行臺北市各公私立幼托機構及國小至大專院校之傳染病通報、監測，學校可於該系統獲得即時公告及疫情相關資訊，系統情資可做為流行病學分析與防疫策略參考之重要依據；107 年疾病通報數共計 2 萬 6,894 筆。

第三節 國際傳染病監測與警示

臺北市自民國 90 年起加入亞洲主要都市網（The Asian Network of Major Cities 21, ANMC21），與會員城市進行防疫經驗交流與策略研討；為有效控制傳染性疾病在亞洲地區蔓延，降低對經濟社會之潛在衝擊，會員城市共同擬定對策計畫，協議以合作方式，共同預防及控制傳染病擴散。



Section 4 *Streptococcus pneumoniae* Vaccination

Starting from October 1, 2017, the service of *Streptococcus pneumoniae* vaccination was extended to seniors. Citizens who are at or above the age of 65, have registered households in Taipei City and have never received *Streptococcus pneumoniae* vaccination can get vaccinated for free at 209 contracted medical institutions in the city.

In 2018, a total of 23,029 senior citizens between 65 and 74 received vaccinations, with a vaccination rate of 22.26%. Up to 9,057 senior citizens at or above 75 received vaccinations. Ever since the vaccination was made available in 2008, a total of 132,129 citizens have received the vaccination thus far.

Chapter 2 Communicable Disease Monitoring Network and Platform

Section 1 Reporting of Legally Defined Infectious Diseases

According to the “Communicable Disease Prevention Act”, medical institutions have to report suspected legally defined infectious disease cases, while the Department has to conduct epidemic investigation and prevention measures targeting the cases that reside in Taipei City, monitor the infectious disease epidemic status of Taipei City, and conduct prevention measures accordingly. Up until December 31, 2018, there were 4,322 reported cases and 3,222 of them were confirmed.

Section 2 Notification of Communicable Diseases by Schools

The Department of Health, Taipei City Government (the Department) jointly established the Communicable Disease Notification System of Schools in Taipei City information platform with the Department of Education as well as the Department of Social Welfare in order to ensure the timeliness of receiving and issuing notifications on disease infections in schools, child care institutions and other densely populated premises. The System formally went online on January 1, 2010. The System allows various public and private childcare institutions and schools of various levels (from elementary to tertiary educational institutions) to notify and monitor communicable diseases. Schools could also use the System to instantaneously receive announcements and information related to various diseases. Information provided by the System could be used as important references for epidemiological analysis and establishing disease prevention strategies. In 2018, a total of 26,894 cases were reported or received information to and from the System.

Section 3 International Disease Monitoring and Alert

In 2001, Taipei City became a member of the Asian Network of Major Cities 21 (ANMC21, which was later renamed Conference on Countermeasures to Combat Infectious Diseases in Asia, or CCIDA). Taipei City shared experience and discussed strategies regarding epidemic prevention with the cities of ANMC21 members. In order to effectively control the spread of epidemics in Asia and limit the potential economic and social impact, the members worked together to formulate countermeasure plans and agreed to cooperate in preventing and controlling the spread of epidemics.



第四篇 精進防疫減毒

民國 108 年 1 月 29 日至 31 日在日本東京都召開第 14 屆亞洲傳染病防治對策會議（Conference on Countermeasures to Combat Infectious Diseases in Asia, CCIDA），議題包含蚊媒傳染病、結核病、愛滋病（HIV / AIDS）及梅毒等，由臺北市政府衛生局及臺北市立聯合醫院昆明防治中心代表出席，報告主題為「2017 臺北世大運傳染病防治措施」、「臺北市高風險族群結核病防治計畫」、「臺北市愛滋防治政策」及「臺北市梅毒防治政策」。



▲ 日本東京亞洲傳染病防治對策會議
Conference on Countermeasures to Combat Infectious Diseases in Asia
held in Tokyo, Japan

第三章 傳染病防治

第一節 流感防治

冬季為流感流行期，每逢春節連假基層診所休診，類流感病人可能至大醫院急診就醫，而造成急診壅塞，不但影響重症病人權益，也使救命的急診空間成為呼吸道疾病交叉感染的傳染窩，為強化醫院應變機制，民國 107 年 1 月 25 日臺北市政府衛生局邀集專家學者及臺北市 8 家重點醫院代表（106 年春節期間急診人次超過 1,000 人次之醫院），召開流感疫情整備應變會議，請醫院開設類流感特別門診，並請急診檢傷單位將流感輕症病人確實轉介至「類流感特別門診」，107 年 2 月 10 至 11 日、2 月 15 至 20 日、2 月 24 至 25 日之例假日及春節連假總計開設 127 診次，分流 1,098 人次。

民國 107 年 1 月 29 日發布「因應流感疫情應變整備臺北市衛生局與八大醫學中心提早啟動」新聞稿 1 篇，公告春節期間 8 家重點醫院開設類流感特別門診 127 診次，331 家公費流感抗病毒藥劑合約診所加開 742 診次，以因應春節期間醫院急診類流感病患就醫分流。

The 14th Conference on Countermeasures to Combat Infectious Diseases in Asia (CCIDA) was held between January 29 and 31, 2019 in Tokyo. Discussion topics included mosquito-borne infectious diseases, TB, HIV/AIDS, syphilis and so forth. The Department and Kunming Prevention and Control Center of Taipei City Hospital attended the conference on behalf of the city and presented the following topics: “Infectious Disease Management of Taipei 2017 Universiade”, “TB Prevention Program for High-Risk Group in Taipei City”, “Strategy of AIDS Control in Taipei City” and “Syphilis Epidemics and Prevention in Taipei”.



▲ 因應流感疫情專家研商會議
Flu Epidemic Response Expert Seminar

Chapter 3 Communicable Disease Prevention

Section 1 Influenza Prevention

Winter is the flu season every year. As primary clinics usually stay closed during the Lunar New Year holiday, patients with influenza-like illness (ILI) are likely to go to big hospitals for emergency treatment, leading to emergency department congestion that not only affects the rights of patients with critical illness but also turns life-saving emergency rooms into sources of cross infections of respiratory diseases. In order to strengthen the response capabilities of hospitals, the Department convened a meeting on responses to flu outbreak on January 25, 2018 and invited experts from 8 highlighted hospitals (those that received more than 1,000 ER patients during the Lunar New Year period in 2017) to attend. The hospitals were instructed to setup ILI special clinics and direct their emergency departments to refer patients with mild symptoms to the clinics. During the regular holidays and the Lunar New Year holidays (February 10-11, 15 through 20 and 24-25, 2018), 127 consultations were provided to 1,098 persons.

The Department issued a press release on January 29, 2018 titled “Department of Health and 8 medical centers making early preparations in response to potential influenza pandemic” to announce that the listed 8 hospitals will offer ILI clinics with 127 consultations during the Lunar New Year period with 742 additional consultations at 331 contracted clinics that offer publicly funded antiviral drugs for influenza to diverge the citizens who might overcrowd the ERs during the holiday season.



為提高公費流感抗病毒藥劑之可近性，民國 107 年持續協調臺北市醫療院所加入合約院所，截至 107 年底計有 391 家，較 106 年 368 家增加 23 家，並輔導合約院所於用藥後 7 日內至防疫物資管理系統回報，7 日內回報率 107 年為 98.9%，較 106 年 98.3%，上升 0.6%。

第二節 登革熱暨茲卡病毒感染症防治

民國 107 年臺北市登革熱確診個案共計 71 例，本土 2 例及境外移入 69 例，茲卡病毒感染症確診 2 例，為越南及泰國境外移入個案。臺北市政府衛生局接獲傳染病通報後，24 小時內完成疫情調查，48 小時內完成通報個案居住地、工作地、其他可能感染地點及病毒血症期間停留達 2 小時以上地點之病媒蚊密度調查，並對社區民衆進行病媒蚊孳生源清除工作之宣導及提供衛教單張。107 年臺北市針對 2,471 里次進行社區環境病媒蚊密度調



▲ 登革熱 / 茲卡防治工作會報
Dengue Fever/Zika Prevention Work Report

查，其中 2 級以上共計 72 里次（2.9%），均已完成改善；高危點聯合稽查共計 731 處，開立 449 張改善通知單；辦理社區衛教宣導活動 3,802 場次，宣導人次達 25 萬 9,342 人次。

為防治登革熱疫情，臺北市政府訂有「首都生活圈登革熱防治計畫」，分別於民國 107 年 4 月 13 日及 10 月 26 日，由臺北市副市長鄧家基擔任主席，召開「臺北市政府登革熱 / 茲卡防治中心」工作會報及 107 年 8 月 3 日及 8 月 30 日召開二次臨時會，由各局處指導所權管之機構、單位或個人，加強清除病媒蚊孳生源、維護環境衛生及辦理病例發生時的整體防治工作。

因應臺北市登革熱境外移入個案引發後續本土疫情之風險，推動「建構登革熱防疫網，社區診所快篩通報」，於民國 107 年增設 82 家社區診所提供登革熱快速篩檢，提升病例偵測效能，縮短個案發病至通報之隱藏期，於第一時間採取必要之防治措施，有效防範疫情擴散。

運用科技監測病媒蚊，提供防疫人員傳染病疫情資訊處理平臺，機關決策者利用傳染病防治資訊整合系統（GIS）提供的相關地理位置，結合環保、民政、勞動局等局處作為讓防治效能加倍。



To increase the accessibility of publicly funded antiviral drugs for influenza, in 2018 the Department continued to communicate with medical institutions in Taipei City regarding the latter becoming contracted. At the end of 2018, there were 391 contracted medical institutions, 23 more than the 368 in 2018. The Department also provided guidance to the contracted medical institutions on reporting through the Disease Prevention Materials Management Information System within 7 days after the use of drugs. In 2018, the reporting rate was 98.9%, an increase of 0.6% from 98.3% in 2017.

Section 2 Dengue Fever and Zika Virus Infection Prevention

In 2018, there were 71 confirmed dengue fever cases in Taipei City; two were local and the remaining 69 were contracted overseas. There were 2 Zika virus infection cases, one from Vietnam and the other from Thailand. Epidemic investigation initiated by the Department is completed within 24 hours after receiving reports, and the investigation of the density of mosquito vectors in the reported case's residence, working place, other possible infecting places, and places that the patient had stayed for more than 2 hours during the viremia period was completed within 48 hours. At the same time, mosquito vector breeding source elimination operations were promoted to community residents. In 2018, investigation of the density of mosquito vectors in communities was conducted in 2,471 villages, including 72 villages (2.9%) at level 2 and above, and improvements were completed at all the villages. Joint investigation was conducted at 731 high-risk locations and 449 improvement notification forms were issued. 3,802 health education sessions were held, with the number of educated persons reaching 259,342.

To prevent and control dengue fever, the Taipei City Government has formulated the "Capital Living Circle Dengue Fever Prevention Plan". On April 13 and October 26, 2018, the staff conferences of the "Taipei City Government Dengue Fever and Zika Virus Control Center" were held, with Taipei City Deputy Mayor Chia-Ji Teng as the chairperson along with two additional ad-hoc meetings convened on August 3 and 30, 2018. All institutions, units or individuals under the administration of each department/bureau were directed to strengthen the efforts to eliminate mosquito vector breeding sources, environment sanitation protection and the overall prevention operations in the event of infection cases.

Due to the risks of overseas cases subsequently causing domestic infections, the policy of "constructing a dengue fever prevention network, fast screening and reporting at community clinics" was implemented. In 2018, 82 additional community clinics were opened to provide the service of fast screening for dengue fever to enhance the effectiveness of infection detection and shorten the period between the time when symptoms first appear in a case and when the case is reported. In this way, necessary preventive measures can be taken immediately to effectively contain the disease.

Mosquito vectors are monitored using technologies to provide disease prevention workers with a platform to process information of epidemic infections. With the geographical locations provided by the epidemic prevention information system (GIS), decision-makers of responsible agencies will be able to double the effectiveness of prevention in cooperation with the Department of Environmental Protection, Department of Civil Affairs, Department of Labor, and other departments/offices.



第三節 腸病毒防治

臺灣位處亞熱帶，全年皆有腸病毒感染發生，民國 107 年臺北市政府衛生局於腸病毒流行期前，訪查 1,459 家幼托機構、校園、親子出入場所等進行洗手衛教、漂白水消毒、疫情處置等查核輔導，召開 2 次府級跨局處會議，與幼托主管機關建立合作模式，透過學校、幼托及補教機構通報機制，依規定進行停課與適當隔離，防範幼兒交叉傳染，為加強流行期管制，運用健保、檢驗資料監測流行疫情，公告臺北市腸病毒流行期，加強民衆風險溝通，並依傳染病防治法落實公權力。

為提升重症醫療品質，偕同疾病管制署防疫醫師及專家委員，至臺北市腸病毒重症責任醫院進行實地訪查、臨床案例交流，強化醫療資源整備及維持轉診管道暢通，107 年 6 月，因應全國新生兒重症疫情，至 25 家設有兒科、婦產科之醫院，針對醫護於產婦衛教與產前症狀調查、隔離動線、消毒措施、人員健康監測等措施進行查核輔導。

民國 107 年全國累計 36 例腸病毒併發重症病例，臺北市確診 1 例，感染型別為伊科 11 型。自 7 月 5 日起臺北市公告進入腸病毒流行期，加強管理違反通報停課規定之幼托機構，7-8 月並於捷運台大醫院站刊登燈箱，宣導「濕、搓、沖、捧、擦」洗手預防腸病毒，防範暑期開學後疫情擴大，針對嬰幼兒感染腸病毒伊科 11 型疫情，運用保母職訓講座、官方臉書專頁、製作主題性三折頁及海報等加強腸病毒防治宣導。

第四節 結核病防治

臺北市政府衛生局配合衛生福利部疾病管制署「結核病十年減半」目標，及降低抗藥性結核風險，辦理「結核病 / 漢生病直接觀察治療 (Directly Observed Treatment Short-Course, DOTS, 中文簡稱都治) 執行計畫」，以「送藥到手、服藥到口、吃完再走」之策略，提高結核病個案完成治療率，有效控制社區傳染源。



▲ 預防新生兒腸病毒主題性宣導海報
Neo-Natal Enterovirus Prevention Theme
Promotion Poster



Section 3 Enterovirus Prevention

As Taiwan is geographically situated in a subtropical region, the threat of enterovirus infection is persistent all year round. And as such, prior to the beginning of the enterovirus season of 2018, the Department has visited and inspected 1,459 child care centers/kindergartens, schools and venues of family gatherings to carry out audits and offer guidance on aspects such as hand washing hygiene, disinfection with bleach, handling of contracted cases and so forth. The Department also convened two inter-departmental meetings at the municipal level to establish model of collaboration with the governing body for child care centers to utilize different reporting mechanisms with schools/child care centers/tuition organizations to implement suspension of classes and quarantine when deemed necessary to prevent cross infection between children. To ensure adequate control during high seasons for enterovirus, the Department will monitor the latest status of the disease by analyzing relevant NHI and inspection data in addition to informing the general public on the high season of enterovirus in Taipei City to strengthen risk communication with citizens as the Department exercises the public authority through the enforcement of the Communicable Disease Control Act.

To improve the quality of medical treatment for critical symptoms, the Department has invited doctors and experts from the Centers for Disease Control to conduct onsite-visits at hospitals in Taipei City designated for the treatment of critical enterovirus infection symptoms with the goal of enhancing the preparation of medical resources and ensuring smooth-running referral channels. In light of the status of critical symptoms for newborns across Taiwan in June 2018, the Department has carried out audits and offered assistance at 25 hospitals with pediatrics, obstetrics and gynecology departments by inspecting nursing personnel's implementation of health education for pregnant women and antepartum symptoms, line of motion for quarantined areas, disinfection measures, personnel health monitoring and so forth.

In 2018, a total of 36 cases of critical enterovirus symptoms were confirmed across the country. One of the cases was in Taipei City, and the type of infection was Echo 11. On July 5 marked the beginning of high season for enterovirus in Taipei City and apart from making relevant announcement, the Department has stepped up its management of child care centers that violate relevant notification and reporting regulations for suspension of classes. Between July and August, the Department also promoted the steps of "Wet, Scrub, Rinse, Clean, Dry" on the advertising light boxes at MRT NTU Hospital Station to prevent the disease from further escalating when school reopens after summer vacation. With regards to newborn infants contracting enterovirus type Echo 11, the Department has sought to emphasize enterovirus disease prevention through aggressive dissemination campaigns including vocational training seminars for babysitters, posting relevant information on our official FB page, preparing trifold pamphlets and posters on the topic and so forth.

Section 4 Tuberculosis Prevention

In coordination with the "Halve Tuberculosis in Ten Years" goal promulgated by CDC and lowering the risk of "drug-resistant tuberculosis", the Department has conducted "Directly Observed Treatment Short-Course (DOTS) Implementation Project" by the strategy of "deliver medicine to your hands, take the medicines, and leave after taking them" to enhance treatment completion rate of tuberculosis cases and effectively control the infection source within the community.

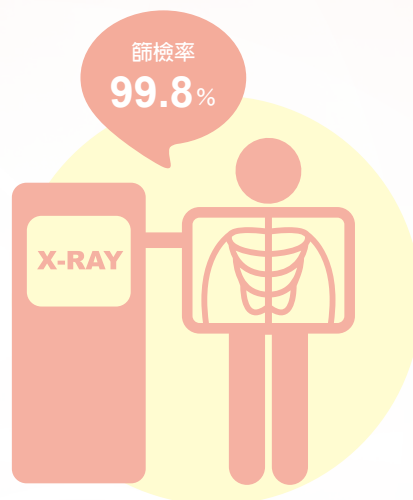


第四篇 精進防疫減毒

自民國 95 年執行都治計畫以來，臺北市結核病發生率已從 94 年每十萬人口 52.9 人，下降至 106 年每十萬人口 29.6 人，降幅達 44%。惟部分個案因注重隱私、工作時間及地點不固定等因素，拒絕加入都治計畫，臺北市爰於 102 年首創「遠端視訊都治關懷服務」，提供個案自主性及便捷性較高之都治服務，107 年加入遠端視訊都治關懷服務個案共 141 人。

民國 107 年起，臺北市政府衛生局配合衛生福利部疾病管制署政策，推動「護理之家、安養及養護機構結核防治計畫」，與兩家安養護機構合作，提供胸部 X 光篩檢及潛伏結核感染（Latent Tuberculosis Infection, LTBI）檢驗，以主動發現結核病個案，並提供潛伏結核感染者預防性治療，降低其未來發病機率，進而減少機構結核病感染風險。107 年共 1,290 人完成胸部 X 光篩檢，篩檢率 99.8%，無胸部 X 光異常而通報為結核病者。

1,085 人完成 LTBI 檢驗，篩檢率 88.1%；陽性數 147 人，陽性率 13.5%，截至 107 年 12 月 31 日，共 106 人完成 LTBI 治療（34 人）或持續治療中（72 人），治療率 72.1%。

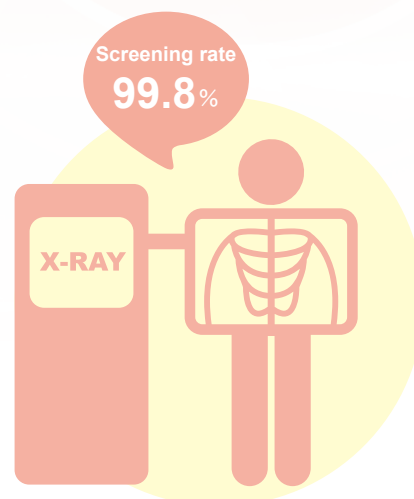


▲ 107 年結核病防治諮詢委員會
2018 Tuberculosis Prevention and Control Advisory Committee



Since the implementation of the DOTS project in 2006, the incidence rate of tuberculosis in Taipei City have reduced greatly from 52.9 persons per 100,000 population in 2005 to 29.6 persons per 100,000 population in 2017, equivalent to a reduction by 44%. However, some cases refused to join the DOTS project due to factors such as concern for privacy, varying work hours/locations and so forth. Therefore, Taipei City developed the “DOTS System” in 2013 which is the first video DOTS system in Taiwan and provide more autonomic and convenient DOTS service for citizens. In 2018, a total of 141 persons join in the Remote Video DOTS caring service project.

Starting from 2018, in conjunction with policy promoted by CDC, the Department has launched the “TB Prevention Plan for Nursing Homes/ Care Institutions/Respite Care Centers” The Department worked with two institutions and provided chest X-ray screening and LTBI test so as to lower their chance of developing active TB in the future and thereby reducing the risks of TB transmission in the institutions. In 2018, the Department helped a total of 1,290 citizens to complete their chest x-ray screening, with a screening rate of 99.8%. None has been reported as TB patient based on their screening results.



A total of 1,085 senior citizens completed their LTBI test, with a test rate of 88.1%; 147 cases had positive test results at 13.5%. As of December 31, 2018, a total of 106 citizens received LTBI treatment (34 had completed their therapy while the remaining 72 are still receiving treatment), with a treatment rate of 72.1%.





第四章 感染管制

第一節 營業衛生管理

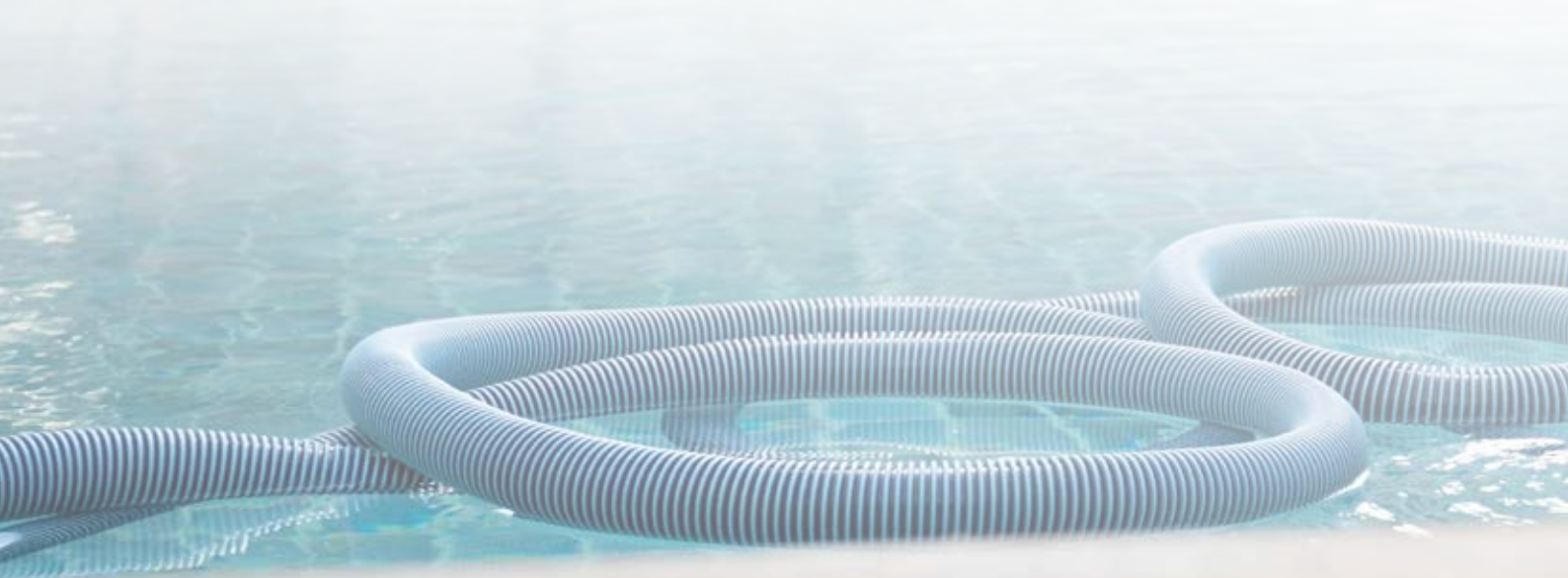
一、營業場所衛生自主管理輔導及違規查處

為提升營業場所衛生安全，防止傳染病散播，針對高風險的六大場所如旅館業、美容美髮業、浴室業、娛樂業、游泳業、電影片映演業等，辦理衛生自主管理輔導及違規查處。依《臺北市營業衛生管理自治條例》進行定期及不定期稽查，包含從業人員健康檢查、維持環境整潔衛生及水質管理（游泳池、三溫暖、溫泉浴池）等重要項目，針對不合格項目輔導改善，並依規定處以罰鍰，民國 107 年共稽查 5,054 家次，輔導改善 1,314 家次，處罰 125 家次；有關水質管理，除規範業者應每月自行汲取浴池水（含溫泉）或泳池水送驗一次外，臺北市政府衛生局亦定期抽驗水質，以維護水質衛生。

為落實上述六大業別營業場所之營業衛生自主管理，業者應指定專人為衛生管理人員，負責該衛生場所衛生事項及指導從業人員衛生管理工作，臺北市政府衛生局持續辦理營業場所衛生管理人員培訓及從業人員講習，進而提升營業場所從業人員衛生管理實務及傳染病防治新知，民國 107 年各業別總計辦理 9 場衛生管理人員培訓，參訓人數計 680 人，其中 647 人通過測驗取得結業證書；辦理 11 場從業人員講習，參加人數計 917 人。



▲ 泳（浴）池水水質抽驗
Swimming Pool Water (Bath) Quality Test





Chapter 4 Infection Control

Section 1 Management of Business Sanitation

1. Sanitation Self-Management Guidelines as well as Investigation and Punishment of Violations

In order to enhance the safety and hygiene of various business venues and prevent contagious diseases from spreading, six major venues of high risks such as hotels, beauty salons, baths, recreational premises, swimming pools and movie theatres have been identified for the Department to implement sanitation self-management supervision and inspection for violations. According to the “Taipei City Self-Governing Regulations for Business Sanitation Management”, regular and irregular audits were conducted, including major issues such as practitioner health examination, environment cleanliness and sanitation maintenance, water quality management (swimming pools, saunas and hot spring bathtubs) and others. Targeting those that did not pass the audits, they were supervised for further improvement and fined accordingly. In 2018, 5,054 premises were audited, in which 1,314 needed improvement and 125 were fined. Regarding water quality management, apart from asking proprietors to deliver samples of bath water (including hot spring water) or swimming pool water once every month to be examined, the Department also regularly conducted sampling testing of the water quality of the aforementioned places in an effort to maintain water quality and hygiene.



▲ 營業場所衛生管理人員培訓課程
Business Facility Health Management Training Course

In order to implement the business venue sanitation self-management for the aforementioned six industries, proprietors are obliged to appoint designated personnel as sanitation management staff, who shall be responsible for sanitation management affairs. The Department continued to hold business premise sanitation management staff training and practitioner lectures to improve their capacity for sanitation management and keep them updated with the latest knowledge in infectious disease. In 2018, a total of 9 sanitation management staff training sessions were held for the aforementioned industries, in which 680 participated in the training and 647 of them passed the examination and obtained certificate of completion. 11 practitioner lectures were also held for a total of 917 participants.

二、營業場所衛生優良自主管理分級認證

為輔導業者從事營業衛生自主管理，主動執行衛生檢查工作，除透過不定期稽查，養成從業人員良好衛生習慣，提升營業衛生水準，辦理衛生優良自主管理分級認證制度，通過評核之業者，舉辦授證典禮頒發認證標章，加強業者責任心與榮譽感，提高業者建立衛生自主管理之理念，以提升消費者衛生安全，保障臺北市市民健康及權益，並藉由消費者選擇機制，獲取同業主動的跟進，達到更高層次的衛生文化。民國 107 年六大業別參加「衛生優良自主管理分級認證」，評核為「優級」及「良級」之業者共 412 家，包括旅館業 138 家（占該業別列管家數 22.2%）、美容美髮業 121 家（占 2.7%）、浴室業（含三溫暖、溫泉）63 家（占 46.7%）、娛樂業 17 家（占 5.8%）、游泳業 55 家（占 49.5%）及電影片映演業 18 家（占 47.4%）。

三、受聘僱外國人健康檢查管理備查

為提升臺北市外籍勞工健康檢查管理服務品質，加強外籍勞工健檢處理時效及相關資料管理，減少外籍勞工逾期健檢的違法情事，全面提升為民服務品質。依據《受聘僱外國人健康檢查管理辦法》，第二類外國人入國工作滿 6 個月、18 個月及 30 個月之日前後 30 日內，雇主應安排其至指定醫院接受以下定期健康檢查項目：胸部 X 光肺結核檢查、漢生病檢查、梅毒血清檢查、腸道寄生蟲糞便檢查（含痢疾阿米巴等原蟲）、一般體格檢查（含精神狀態）、麻疹及德國麻疹之抗體陽性檢驗報告或預防接種證明，以及其他經中央衛生主管機關依工作性質及勞動輸出國特性認定必要之檢查。

民國 107 年辦理受聘僱外國人健康檢查備查共計 3 萬 1,034 件，合格 3 萬 892 件；不合格 142 件，其中以 X 光肺部檢查之不合格率最高，占 62.2%。



▲ 衛生優良自主管理分級認證
Graded Certification for Excellence in the Self-Management of Sanitation



2. Graded Certification for Excellence in the Self-Management of Sanitation in Business Premises

In order to guide proprietors to actively implement daily sanitation examination operations, the Department has been conducting irregular audits to help relevant personnel to cultivate good sanitation habits and improve business sanitation standard with self-management methods. Not only that, we also implemented the system of Graded Certification for Excellence in the Self-Management of Sanitation in Business Premises. Those who passed the assessment will be certified with a label as a positive reinforcement for to help them nurture the concept of accountability and honor. By boosting their awareness for sanitation self-management, these proprietors will in turn contribute to the cause of ensuring the health for consumers and protecting the well-being and rights of Taipei citizens. Through the consumer selection mechanism, proprietors will be inspired to follow suit and thereby contribute to a higher level of sanitation culture. In 2018, out of the six industries that took part in the “Graded Certification for Excellence in the Self-Management of Sanitation in Business Premises”, 412 premises were graded as “excellent” and “outstanding” premises. They include 138 hotels (22.2% of all the premises in the same industry), 121 beauty salons (2.7%), 63 bath premises (including sauna and hot spring) (46.7%), 17 entertainment premises (5.8%), 55 swimming pools (49.5%), and 18 movie theaters (47.4%).

3. Health Examination and Follow-Up Checks of Foreign Employees

In order to improve the health examination management service quality of the foreign laborers in Taipei City, the foreign labor health examination operation time period and related information management were strengthened in order to reduce illegal issues such as overdue health examination and improve service quality comprehensively. According to the “Regulations Governing Management of the Health Examination of Employed Aliens”, employers should arrange category-2 foreigners working in Taiwan to designated hospitals to take the following regular health examination 30 days before or after 6 months, 18 months and 30 months of their entry: chest X-ray examination, leprosy examination, syphilis serum examination, fecal examination on intestinal parasites (including *Entamoeba histolytica* and others), general physical fitness examination (including mental status), proof of positive measles and rubella antibody titers or measles and rubella vaccination certificates, and other examination items deemed necessary by the central health authority based on the nature of the work and labor-exporting countries.

In 2018, 31,034 foreigner health examinations were conducted. Among them, 30,892 passed the examinations and 142 of them did not. The item with the highest unqualified rate was X-ray lung examination, which took up 62.2%.





第二節 醫院感染管制

為保障病人就醫安全、強化院內感染管制相關規範，提升醫界對感染管制之重視及提升醫院感染管制品質與執行效率，並提供醫院同仁安全的工作環境，民國 107 年度進行 18 家地區級以上醫院感染管制實地查核，查核結果均符合規範。

第三節 長照機構感染管制

因人口老化及社會結構改變，長期照護機構之服務需求亦隨之增加，不同機構具有不同之感染管制樣態及需求。由於機構住民之免疫力較低，使用侵入性裝置較高，住民居住於有限共同空間，照顧工作者需照顧多個住民，一旦發生感染，易威脅其生命安全。為提升住民安全環境及照護品質，自民國 103 年度起分年推動「臺北市長期照護機構感染管制查核計畫」，針對臺北市長期照護機構之類別及屬性，進行感染管制查核，以保障住民與工作人員的權益。



藉由感染管制查核作業，提升機構對感染管制之重視及加強落實感染管制作為，降低機構內醫療照護相關感染風險及事件發生，強化工作人員知識態度落實於照護住民之技能，達成有效防範於未然之效果，提升照護服務品質。

醫院感染管制查核書面審查及實地查核

Hospital Infection Control Inspection Written Audit and On-site Inspection





Section 2 Hospital Infection Control

In order to ensure the medical safety of patients, steps have been taken to strengthen regulations for hospital infection control, increase the importance of infection control for medical professionals and provide hospital workers with a safe working environment, the Department has conducted onsite inspections for infection control at 18 regional hospitals in 2018. All 18 hospitals were found to be compliant.

Section 3 Long-Term Care Institution Infection Control

As a result of an aging population and changes in the social structure, demands for services from long-term care institutions have increased. Since residents of the institutions usually have low immunity, use invasive devices more frequently and share limited space, a caregiver needs to look after multiple residents and is likely to find himself/herself in a life-threatening situation in the event of an infection. To help create

a safe living environment and care quality for residents, the Department has been implementing the “Plan on Inspection of Infection Control at Long-Term Care Institutions in Taipei City” since 2014 on a year-by-year basis for long-term care facilities in Taipei City in accordance with their types and nature. By implementing infection control inspection, we strive to safeguard the rights of citizens and workers.

Through inspections of infection control, the institutions have attached more importance to infection control and enhanced its implementation, thus lowering the risks of health care-related infections and group infections. The knowledge, attitudes and skills of workers regarding residents care have also improved, and so have the quality of care.



▲ 長照機構感控查核，書面審查、洗手步驟

Long-Term Care Institution Infection Control Inspection, Written Audit, and Hand Washing Steps



第四節 生物安全實驗室查核

生物性實驗如操作不當、缺乏個人防護或設備未維護保養等，易增加感染性物質洩漏的風險，使人員暴露於危害中的機率提高，故生物性實驗之操作人員應當加強維護自身健康、他人及環境的安全衛生，並遵守生物安全的相關規範。隨著生物科技及醫藥產業的迅速發展，我國於生物安全管理的意識也逐漸提升，臺北市政府衛生局為維護實驗操作人員的安全衛生，依據相關法規之規定，進行生物安全第二等級（BSL-2）微生物實驗室查核作業計畫，以落實實驗室生物安全。

國內有眾多持有第二級危險群（RG2）病原體之實驗室或保存場所，其生物安全管理不容輕忽，衛生福利部疾病管制署每年定期進行生物安全查核，並於民國 105 年起將生物安全第二等級（BSL-2）微生物實驗室或保存場所之實地查核工作，委由地方衛生局辦理，促使受查核單位透過外部實驗室生物安全查核措施，強化生物安全管理組織效能，落實所轄實驗室之生物安全管理權責，並協助實驗室發現潛在生物危害風險。

針對查核缺失進行改善，避免發生實驗室感染意外。民國 107 年查核 13 家生技產業機構及 1 家醫療機構，符合查核基準比率 86.6%。





Section 4 Inspection of Biosafety Laboratories

During a biological experiment, improper practice, lack of personal protection or unmaintained equipment is likely to increase the risk of leakage of infectious substances and elevate the chance of personal exposure to hazards. Therefore, persons performing biological experiments must vigorously protect their own health and the safety and sanitation of others and the environment, and follow relevant regulations of biosafety. With the

rapid development of biotechnology and the healthcare industry, awareness of biosafety management has been gradually growing in Taiwan. To protect the safety and health of persons performing experiments, the Department has implemented the plan for inspection of BSL-2 microbiology laboratories according to relevant regulations, to ensure biosafety of laboratories.



▲ 生物安全實驗室查核
Biosafety Laboratory Inspection

There are many laboratories or storage areas where RG2 pathogens are kept, and any negligence in biosafety management is definitely not allowed. CDC conduct biosafety inspections every year. Since 2016, CDC have commissioned the departments of health of local governments to conduct on-site inspections of BSL-2 microbiology laboratories or storage areas. Through the biosafety inspection measures of by external units, the inspected units have been instructed to enhance the effectiveness of biosafety management, fulfill their duties regarding the biosafety management of laboratories under their jurisdiction, and assist the laboratories in discovering potential risks of biohazards.

Any defect found during inspections must be rectified in order to prevent accidents of laboratory infections. In 2018, 13 governmental agencies and academic institutions were inspected, and the rate of meeting the inspection standard was 86.6%.



第五章 毒品危害防制暨愛滋病防治

第一節 愛滋病及性病防治

臺北市自民國 73 年至 107 年，本國籍 HIV 累計通報人數為 5,789 人，男性 5,424 人占 97%，女性 169 人占 3%，男女比例約為 32：1。年齡中位數為 29 歲，年齡層分布以 25-34 歲最多，19-24 歲次之，危險因子以同性間不安全性行為為主。

臺北市愛滋防治工作由臺北市立聯合醫院昆明防治中心專責規劃執行，民國 107 年 3 月 20 日臺北市簽署國際性愛滋防治合作計畫「巴黎宣言」，成為「Fast-track Cities 愛滋快速通道城市」的一員，為華人地區之首，透過國際交流，建立經驗及資源共享管道。

臺北市持續依世界衛生組織訂定 90-90-90（即 90% 知道自己感染、90% 感染者有服藥、90% 服藥者病毒量受到控制）目標執行愛滋防治策略。依據衛生福利部疾病管制署統計，民國 107 年臺北市 3 個指標分別為 80-91-96。第 3 個指標藉由提供一天一顆藥的簡易服藥模式，使感染者有效抑制體內病毒量，目前已達到 96%。第 2 個指標藉由專業個案管理師長期協助愛滋感染者，鼓勵及早進入醫療體系，已到達 91%。第 1 個指標目前僅 80%，臺北市積極開發多元愛滋篩檢管道引導民衆接受篩檢，期使未確診感染者藉由篩檢獲知病況，及早進入醫療體系，避免病毒傳播。106 年底起愛滋病新發生個案趨勢已呈現下降趨勢，顯見臺北市執行愛滋病防治之成效。

臺北市運用四段七級的預防架構，發展減少社會歧視、降低新增感染、完善個案照護之策略。民國 107 年召開 2 次愛滋防治工作小組會議，結合各局處推動愛滋宣導；同時加強篩檢諮詢服務訓練，開發多元愛滋篩檢管道，鼓勵易感染族群接受暴露前預防性投藥；重視提升愛滋個案管理品質，結合臺北市 10 家愛滋指定醫院個案管理師，確保臺北市個案均能穩定就醫服藥，以維持病毒測不到、不具傳染力的情況，降低臺北市愛滋感染發生率。





Chapter 5 Prevention of Drug Abuse and AIDS

Section 1 AIDS and STD Prevention

Between 1984 and 2018, the total number of native citizens who have been reported with HIV infection in Taipei City came to 5,789, with 5,424 males (97%) and 169 female (3%). The male to female ratio was approximately 32:1. The median age is 29, with the majority of population lying between ages 25-34, followed by ages 19-24. The primary risk factor for HIV infection remains to be unprotected MSM (men who have sex with men).

The task of HIV/AIDS prevention in Taipei City is entrusted to Kunming Prevention and Control Center of Taipei City Hospital. On March 20, 2018, representative of Taipei City signed the global partnership initiative “Paris Declaration” committing to accelerate and scale-up local HIV responses, and Taipei has become a member of the “Fast-Track Cities.” Taipei City is the first in the Chinese residential regions to join the partnership initiative and we will construct channels of experience and resources sharing in this area through international exchange and collaboration.

Taipei City continues to practice its HIV/AIDS prevention strategies in accordance with the 90-90-90 (i.e. 90% of all people living with HIV will know their HIV status; 90% of all people with diagnosed HIV infection will receive sustained antiretroviral therapy and 90% of all people receiving antiretroviral therapy will have viral suppression) target set forth by the UNAIDS. According to the statistics from CDC, Taipei City’s three respective indicators came to 80-91-96 in 2018. For the 3rd indicator, through a simple medication model of “one pill per day”, those infected with HIV were able to effectively suppress the virus and currently Taipei City has achieved 96% in this area. With the long-term assistance of dedicated case managers working with those infected with HIV to receive medical assistance as soon as possible, Taipei City has achieved 91% for the 2nd indicator. By contrast, Taipei City has only reached 80% for the first indicator thus far; Taipei City Government will actively develop more HIV/AIDS screening channels for more people to receive HIV screening tests in the hopes that those with undiagnosed HIV infection know their status and receive medical assistance as early as possible to prevent from HIV transmission. Since the end of 2017, the number of new HIV/AIDS cases in Taipei City has been reduced, reflecting the success in Taipei City’s efforts in HIV/AIDS prevention.

Taipei City Government has developed its strategies to reduce social discrimination and new HIV infections while ensuring adequate care for existing HIV/AIDS patients through its “four-level and seven-tiered” framework of prevention. In 2018, 2 HIV/AIDS prevention working group meetings were held to call on different departments to work together in the advocacy of AIDS prevention. At the same time, Kunming Prevention and Control Center also took steps to strengthen the training programs of screening and consultation service, to develop a variety of HIV screening resources and to encourage high-risk population to take pre-exposure prophylaxis (PrEP). Emphasis has also been made on the improvement of HIV/AIDS case management quality as the Center collaborated with the HIV/AIDS case managers at 10 designated hospitals across Taipei City to ensure that patients with HIV/AIDS will take their medication as instructed in order to keep their virus undetectable and untransmittable, and in turn reduces the HIV incidence in Taipei City.



第二節 毒品危害防制

臺北市政府為加強辦理毒品危害防制業務，設立毒品危害防制中心，由臺北市市長柯文哲親自領軍出任中心主任，並於民國 104 年 7 月成立臺北市立聯合醫院昆明防治中心為府級授權之專責單位，進行臺北市毒防政策之全盤評估、規劃與推動，橫向整合相關局處，連接民間資源，達到全面防制毒品與維護社會治安之目的。

毒品危害防制中心以三級預防為架構制定策略地圖，一級預防以避免民衆接觸毒品為策略主題，規劃及提供適性之反毒教育宣導，並利用市府官方 LINE 群組連結、FB 社交網站、毒防中心官方網頁提供最新即時的資訊與服務，並推行北極星反毒專案，透過議員系統、教育系統、里長系統、家長系統等反毒四大通路，協力打擊毒品。二級預防為完善毒品防制體系，發展毒防在地化社區防治工作，召開核心團隊會議，集合社會局、教育局、警察局、區公所、健康中心、社福團體等共同進行社區資源盤點，研商交流可行方案共同建立臺北市兒少社區毒品防制體系。

三級預防為提供優質個案服務，結合各項資源提供就醫、就業等各項轉介服務，民國 107 年社區藥癮者個案管理追蹤輔導 3,944 人，總計追蹤輔導 3 萬 1,364 人次，追蹤輔導率達 99.03%。同時辦理藥癮者（含青少年）及家屬支持團體，並連結民間團體資源提供藥癮者家庭支持服務，促進藥癮者及其家庭復歸社會，107 年辦理 116 場次，共計 4,168 人次參加。



▲ 毒危中心北極星反毒計畫記者會
Press Conference of "The Polar Star Anti-drug Project" of Kunming Prevention and Control Center



Section 2 Drug Abuse Prevention

To strengthen the prevention of drug abuses, the Taipei City Government established the Drug Abuse Prevention Center, with the mayor Wen-Je Ko taking up the post of the leader of the center. In July 2015, the Kunming Prevention and Control Center of Taipei City Hospital was founded as an exclusive unit directly authorized by the Taipei City Government for the overall assessment, organization and implementation of drug abuse prevention policies in Taipei City. It integrates relevant departments/offices in a horizontal way and combines resources from civil groups to achieve the goal of comprehensive prevention of drugs and maintenance of public order and social security.

The Drug Abuse Prevention Center adopted the framework of “three-level prevention” in the establishment of its strategic map. The primary prevention focuses on protecting the general public from the exposure of substance as the strategic goal by planning and provision of appropriate anti-drug advocacy. The latest information and services are provided through Taipei City Government’s official LINE group, Facebook and the official website of the Drug Abuse Prevention Center. The Center also launched the Polar Star Anti-Drug Project along with four major distribution network (i.e. city councilors, educational system, chiefs of villages and parents) to combat drug abuse. The secondary prevention involves the strengthening of the existing drug prevention system and the development of communityism for drug prevention. To achieve this, the Center has convened core team meetings and called on units including the Department of Social Welfare, Department of Education, Taipei City Police Department, District Offices, Health Centers, social welfare organizations and so forth to inventory existing community resources and discuss potential solutions for the creation of a community drug prevention system for youths and adolescents in Taipei City.

The tertiary prevention is achieved by providing high quality case services by integration of relevant resources to help those in need to receive medical assistance/employment and other referral services. In 2018, a total of 3,944 persons known with issue of substance abuse have been tracked and managed, with a total number of case management of follow-up reaching 31,364 at a tracking and assistance rate of 99.03%. At the same time, the Center has also organized support groups for those with substance abuse (including teenagers) and family support groups while connecting non-governmental organizations to provide service of family support so that substance users and their families can return to the society. In 2018, a total of 116 sessions were held and attended by 4,168 persons.



第五篇
優化
緊急救護



5

Ameliorate Emergency Medical Care





第五篇 優化緊急救護

第一章 提升緊急醫療效能

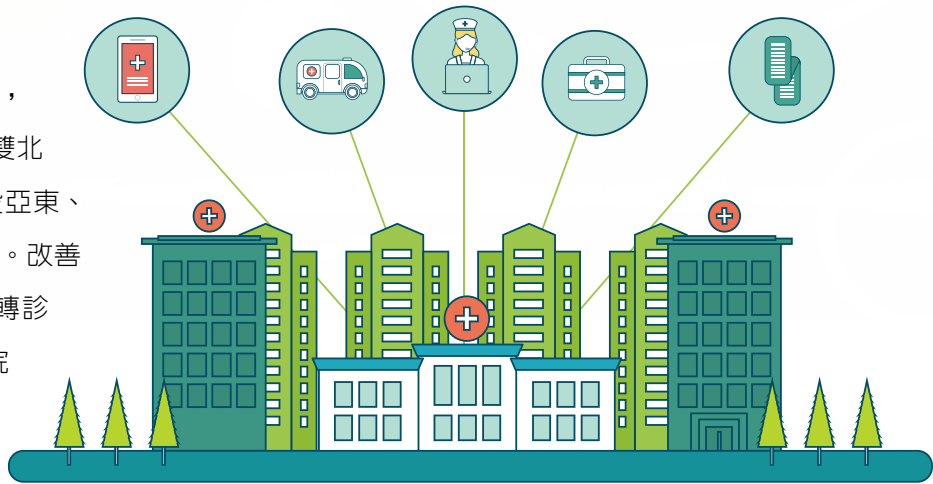
第一節 提升急診品質

輔導轄內醫院配合衛生福利部計畫，整合雙北市 35 家急救責任醫院，形成雙北網絡，由臺大醫院擔任基地醫院，下設亞東、雙和、馬偕、三總與北榮等 5 個次網絡。改善急診轉診安全與品質作業，精進急診轉診流程，督促與輔導臺北市急救責任醫院使用衛生福利部之轉診電子作業平臺，完成轉診單開立、回復與登錄轉診相關資料並請病患填寫「緊急傷

病患轉診同意書」；督導各醫院轉院前需妥適聯繫，經由電話及線上電子轉診系統聯繫交班，落實轉診交班標準作業程序再進行院際間轉診。

各網絡醫院遇有急診收治病患須轉診時，應根據其他網絡醫院專長，先啟動平行轉診，或推動基地醫院下轉機制，促進網絡內醫院病床使用效率，避免病人過度集中於壅塞醫院（基地醫院）以紓解並改善急診壅塞情形。為保障民眾就醫權利，宣導民眾若因醫院急診無法提供適切治療，或因病患個人因素要求轉診時，醫院應告知轉診之可能風險，記載於病歷，並取得病患或其家屬填寫之轉診同意書，再讓病患進行轉診，當病患主動要求至他家醫院接受治療，得向法院人員申請病歷摘要或檢查報告等資料，供欲前往醫院即時了解病況，以提升轉診安全。

臺北市政府衛生局負責督導與協調網絡內之醫院轉診相關疑義，民國 105 年已完成修訂「大臺北地區急救責任醫院急重症病患院際間轉診疑義反應表」，與新北市政府衛生局及臺北市急救責任醫院確認實施運用，臺北市政府衛生局亦提供單一窗口，受理協調並釐清疑義雙方之轉診問題點，及回應疑義雙方，並將相關案例於衛生福利部 104 至 105 年「雙北市提升急診暨轉診品質計畫」網絡委員會會議中討論適切執行方案，透過醫院督導考核強化監督改善，以落實緊急傷病患轉診安全與品質並冀減少爭議之發生，107 年臺北市醫院院際間轉診爭議案件共查辦 3 案；醫院與消防局間轉送爭議案件共查辦 6 案。





Part 5 Ameliorate Emergency Medical Care

Chapter 1 Improving the Performance of Emergency Medical Services

Section 1 Improving the Quality of Emergency Care

The Department provided consultation to its hospitals and worked with the Ministry of Health and Welfare (MOHW) project to integrate a total of 35 emergency responsibility hospitals in the Greater Taipei Network (including the 2 cities of Taipei and New Taipei). The National Taiwan University Hospital (NTUH) was selected as the base hospital while Far Eastern Memorial Hospital, Shuang Ho Hospital, MacKay Memorial Hospital, Tri-Service, and Taipei Veterans General Hospital formed the 5 secondary networks. Improvements were made to the safety and quality of emergency care and referrals as well as to streamline its procedures. The Department supervised and counseled emergency responsibility hospitals in Taipei City on the use of the Ministry of Health and Welfare (MOHW) online referral platform to issue, respond and register referral data while requesting the patient to complete the Emergency Care Patient Referral Agreement. The Department also supervised various hospitals on the need to conduct proper communications such as the use of the telephone or the online e-referral system for transferring shift handover data and proper completion of Standard Operating Procedures (SOPs) required by the regulations for shift hand overs before any Inter-Hospital Transfers (IHT).

Whenever network hospitals are required to implement horizontal transfer of patients admitted into emergency care, the specialization of other hospitals within the network shall be referenced to improve the effectiveness of bed occupancy rates and prevent patient build-up and overcrowding of certain hospitals (such as various base hospitals). To safeguard citizens' right to receive medical treatment, the Department has advocated that when a hospital be unable to provide the proper treatment or if a patient or his/her family members demand a transfer, the hospital is required to inform the patient of the possible risks, include the actions taken in the medical records and acquire a letter of agreement of the transfer from the said patient or his/her family members before transferring the patient. To ensure transfer safety, a patient who makes the request to be transferred to another hospital for treatment may ask the medical staff to provide his/her medical history summary, medical diagnosis report, and other information to the receiving hospital to ensure proper understanding of his/her medical conditions.

The Department was responsible for supervising and coordinating hospital referral related doubts within its network. In 2016, the "Greater Taipei Region Emergency Responsibility Hospitals Referral Doubt Response Form on Severe Patients" was amended and implemented along with The Department of Health, New Taipei City Government and Taipei City emergency responsibility hospitals. The Department also provides single-counter services to coordinate, clarify and answer the referral doubts and issues between hospitals. The appropriate implementation plans of related cases were discussed in the 2015 and 2016 "Greater Taipei Network Emergency and Referral Quality Enhancement Plan" network committee meetings held by the Ministry of Health and Welfare. By enhancing supervision and improvement through hospital assessment, the Department expected to ensure the safety and quality in the referral process of emergency cases and reduces the occurrence of disputes. In 2018, 3 cases of referral disputes between Taipei City hospitals occurred and 6 cases of referral disputes between hospitals and fire departments occurred.



第二節 強化正確就醫觀念

囿於國人就醫習性，遇急症習慣前往大醫院急診，造成醫學中心急診過度壅塞，為使臺北市民養成「小病到小醫院，大病到大醫院」之正確就醫觀念，並宣導民衆善用急診資源，讓醫學中心充分發揮執行緊急醫療業務，提供重症患者妥善、安全醫療服務，廣續推動臺北市「醫學中心急診待床轉院」計畫，針對醫學中心到院後待床超過 24 小時之病患，由醫師建議病患轉診至就近適當之急救責任醫院，雙方醫院再協調安排救護車協助病患轉院並直接入住病房，期降低病患於急診室候床的時間，亦減輕民衆及其家屬於急診室候床之辛勞。當符合之個案進行轉院成功，派車端醫院得申請轉院救護出勤費，該經費由臺北市政府衛生局支應，民國 107 年計服務 252 人次。

民國 104 年首推「臺北市立聯合醫院與醫學中心（國立臺灣大學附設醫院）轉診計畫」，建置各院區單一窗口服務，透過臺大醫院窗口提供欲轉院病人之基本資料，另告知欲入住之院區、病床別等資訊以找尋合適床位，透過 LINE 群組即時回復，轉出醫院則提供病人檢驗、檢查相關結果，並派遣救護車轉送病患，以利後續病情評估與治療。統計 107 年自臺大醫院急診直入臺北市立聯合醫院病房共 516 人。

為保障醫療服務品質，醫學中心依地緣區域性完成到院前病患分流之規劃，與鄰近區域級醫院建立合作機制，疏解急診滿床壓力，如遇有非重症病患欲前往已報備急診滿床之醫院時，臺北市政府消防局救護人員將向民衆充分解釋後，建議其接受轉介至該院之合作醫院，可讓病患儘速獲得良好的醫療照護及處置，於民國 97 年 6 月 1 日實施「到院前急診分流」計畫，107 年經消防局輔導送醫 2,858 件中，計 957 件（33.48%）同意接受到院前急診分流（前往非壅塞之急救責任醫院），以落實醫院緊急傷病患能力分級制度。



Section 2 Strengthening the Concepts of Seeking Proper Medical Care

People in Taiwan tend to seek medical aid at large hospitals in response to emergency conditions and this habit has led to the overcrowding of emergency departments at medical centers. The Department therefore continued to implement the Transfer Services for Patients Waiting for Emergency Care at Medical Centers and advocated the proper concept of Seeking Help for Minor Ailments at Small Hospitals and Major Conditions at Large Hospitals amongst the citizens of Taipei to encourage people to make better utilization of emergency care medical resources, allow medical centers to fulfill its primary role providing emergency medical services, and provide critical patients with proper and safe medical services. For patients who spent more than 24 hours waiting for a hospital bed after being admitted to a medical center, the doctor would recommend a transfer to a suitable emergency responsibility hospital nearby. Both hospitals will coordinate to make the necessary arrangements and ambulance services to transfer the patient to an available hospital bed. This strategy is expected to reduce the waiting times for hospital beds while reducing the stress experienced by the patient and their family members during waiting in emergency departments. After successfully transferring a patient who meets the criteria, the hospital dispatching the ambulance may also claim transfer ambulance fee subsidies from the Department. A total of 252 individuals benefited from this transfer service in 2018.

The Department initiated the Taipei City Hospital and Medical Center (National Taiwan University Hospital) Transfer Project for the first time in 2015 that established single-counter services at various hospitals. Through the provision of basic information of patients who demand referral from the counter of National Taiwan University Hospital (NTUH), it would also provide other information such as the patient's desired hospital and hospital bed category in order to find suitable hospital beds. An instant response would be provided through LINE group chat. The transferring hospital would then provide the patient's relevant diagnostics and testing results and dispatch an ambulance to transfer the patient to the specified destination for further disease evaluation and treatment. Data showed that a total of 516 cases were transferred from the NTUH emergency department to Taipei City Hospital beds in 2018.

To ensure medical service quality, medical centers have completed patient reroute plan by cooperating with neighboring regional hospitals according to their geographical location. This plan would release the pressure of overcrowded emergency department. If non-severed patients intend to go hospitals with notifying overcrowded emergency department, the emergency staffs of Taipei City Fire Department will transfer them to its cooperating hospital after full explanation, so that patients can receive good medical care and treatment as soon as possible. The "Distribution of Pre-hospital Emergency" was implemented since June 1, 2008. Among the 2,858 cases that the Fire Department sent to hospitals, 957 cases (33.48%) agreed to rerouting before arriving at a hospital (heading for the hospitals with first-aid capabilities that are not overcrowded) in order to implement the emergency department patient classification system of hospitals.



第二章 救護資源管理

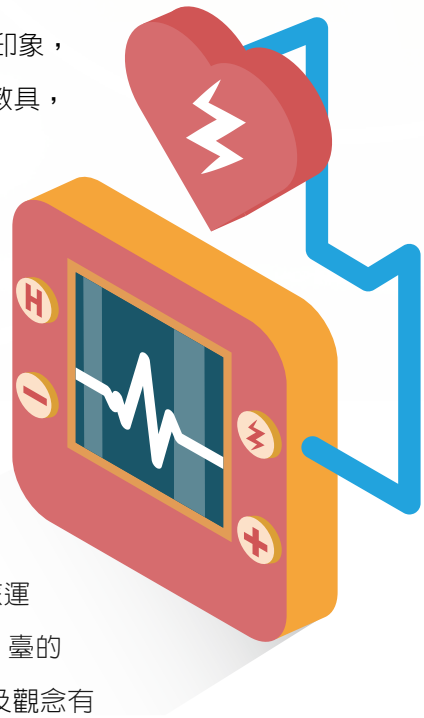
第一節 善用公共場所急救設施

為加深民衆對急救技能及體外電擊心臟去顫器（簡稱AED）的印象，一方面將心肺復甦術（CPR）急救訓練內容簡化，並增加實用的教具，以深化民衆學習效果，提高旁觀者施救意願；另將AED納為各類大型活動（如跨年、端午嘉年華及 102 全國運動會等）救護站必備裝備，增加能見度並保障與會人員安全。

《緊急醫療救護法》增修條文於民國 102 年 1 月 16 日公布實施，除要求特定公共場所應設置AED外，亦揭櫫「救人不受罰」的精神，強調全民共同把握黃金時間搶救生命。衛生福利部則於同年 5 月及 7 月公告「應設置自動體外電擊心臟去顫器（AED）之公共場所」以及《公共場所必要緊急救護設備管理辦法》，臺北市府於同年 3 月 19 日率先宣示響應，在每日旅運量 170 萬人次的捷運各場站設置AED，並已達成 3 年內設置 1,000 臺的目標，透過各單位及企業機關紛紛響應，設置或捐贈AED的意願及觀念有顯著提升。

臺北市AED設置政策自民國 98 年推動以來，公、民單位積極配合中央政策，臺北市政府各單位亦持續宣導及推動公共場所設置AED，設置量已具規模，截至民國 107 年底已設置 1,883 臺AED，設置密度達每十萬人口 70.6 臺。臺北市AED設置場所皆依規定於「衛生福利部公共場所AED急救資訊網」完成資料登錄，供民衆查詢及緊急救護使用，讓AED充分發揮效益。

臺北市政府衛生局更提供充分的免費課程，輔導AED設置場所申請「AED安心場所」認證，凡通過認證者，代表該場所有 70% 員工接受CPR及AED訓練，管理員完成 220 分鐘AED管理員訓練並取得證照，場所有清楚標示AED所在位置，可在發生緊急事故時即刻拿到AED，更有許多受過訓練的人員協助搶救，把握黃金救援時刻，獲得即時處置提高存活率，全面建置臺北市成為健康城市、安全社區，更保障市民生命安全。臺北市累計至 107 年 12 月 31 日止已有 1,229 處場所取得「AED安心場所」認證。





Chapter 2 Managing Emergency Resources

Section 1 Use of Public Emergency Treatment Facilities

To enhance public awareness for first aid skills and the use of AED, achieve better learning outcomes and improve the willingness of bystanders to provide assistance as required, the Department made steps to simplify the contents of CPR and first aid training and provided more practical teaching tools. AED was also included as mandatory equipment for first-aid stations during various large-scale events (such as the New Year Countdown, the Dragon Boat Festival and the 2013 National Sports Day etc.). Measures were also taken to improve visibility and protect the safety of visitors attending these events.

Additional articles to the Emergency Medical Services Act were promulgated and enforced on January 16, 2013. The new provisions required public venues to be furnished with Automated External Defibrillators (AED) and stipulated that those attempting to rescue people should not be subject to legal punishments so that bystanders would be encouraged to make full use of the golden time to save lives. The Ministry of Health and Welfare (MOHW) also announced “a list of public venues that must furnish AEDs” and “Regulations Governing Public Venues Required to Provide Emergency First-Aid Equipment” in May and July of the same year. The Taipei City Government was the first to demonstrate support as early as March 19 of the same year. All metro stations with daily ridership exceeding 1.7 million were furnished with AEDs. The City Government also successfully achieved the objective of deploying 1,000 units of AEDs within 3 years. Various government agencies and private companies also showed their support and demonstrated increased willingness to setup or donate AEDs.

Since Taipei City has carried out AED installment policy in 2009, public and civil institutions have actively coordinated with the policies of the central government. Various institutions of the Taipei City Government have also constantly propagated and promoted the installment of AED at public venues and have achieved a certain level of installment. By the end of 2018, 1,883 AEDs have been installed, meaning that there were 70.6 AEDs per 100,000 people. The places installed with AEDs in Taipei City have all completed registration on “Taiwan Public AED Registry” according to regulations, so that citizens can inquire on the website for emergency usage and allow AEDs to be comprehensively effective.

The Department further provided free courses in instructing AED installing venues to apply for “AED Safe Place” recognition. For those places which have received the recognition, it means that more than 70% of the employees have accepted CPR and AED trainings, the administrator have completed 220 minutes of AED administrator training and received a license, and the locations of AEDs are clearly signaled so that AEDs can be achieved at the first moment of emergency. If more trained people can assist in rescuing, patients can receive timely treatments and their survival rate would be increased. The comprehensive installment of AEDs allows Taipei City to become a healthy city and safe community and ensure the safety of the citizens’ lives. As of December 31, 2018, 1,229 premises and venues in Taipei City have passed the “AED Safe Place” certification.



第二節 防止救護資源濫用

臺北市救護量逐年攀升，為遏止緊急救護資源濫用，提升到院前緊急救護品質及效率，臺北市政府衛生局與消防局共同研議規劃，自民國 101 年 12 月 8 日起實施「臺北市民眾濫用消防局救護車收費計畫」，針對民眾指定 119 救護車至非急救責任醫院及未赴急診室檢傷掛號者之民眾進行收費，每趟次收取 1,800 元救護車使用費。衛生局與消防局及社會局共同組成「臺北市政府緊急救護審核小組」，定時召開會議，針對疑義個案進行逐案審查，其中列管之高救護量使用者不乏遊民、低社經非重症者、酒醉路倒者等，除醫療外並評估個案社會福利需求，包含就業、安置、關懷訪視、社會救助及相關福利之供給，整合社會福利資源提供適切服務及輔導，落實弱勢族群權益之維護及社會資源合理分配。

依據臺北市政府消防局統計資料顯示，民國 107 年已開立 50 張救護車使用費繳款單，除 8 張尚未繳納，其餘均已繳納。

第三節 救護車管理

為建立完善的緊急醫療救護系統，提供合法的救護運輸設備及救護技術員，提升臺北市市民對於緊急醫療救護的重視及信賴，臺北市政府衛生局對所轄救護車設置機構之人員配置、設備及救護業務，每年均進行定期及不定期檢查，並辦理急救責任醫院及救護車營業機構督導考核加強管理。



臺北市救護車民國 107 年初數量共計 192 輛，全數依規定完成定期稽查，合格率达 100%；另亦依規定完成 192 輛救護車不定期稽查，檢查結果合格率达 100%。

臺北市輔導合法立案之救護車營業機構共計有 6 家，分別為仁光、一心、聯安、和興、駿龍及生命之星救護車有限公司，另有外縣市跨區至臺北市營運之救護車營業機構為九九九、順新、和安及捷安救護車有限公司共計 4 家，臺北市政府衛生局於民國 107 年 11 月 26 日至 107 年 12 月 7 日辦理救護車營業機構進行督導考核，考核結果除上傳臺北市政府衛生局網站提供民眾參考外，為保障臺北市民救護運送之安全與權益，亦函知臺北市各醫療院所（含護理機構）暨社會局轉知安養護機構作為選擇合約救護車營業機構之參考。藉由加強臺北市救護車稽查工作，提升救護車設置機關（構）管理效能、建立正確緊急救護作業觀念及提供良好的緊急救護服務品質，保障臺北市市民救護運送之安全與權益。截至 107 年底，臺北市總計 24 家救護車設置機關（構），救護車總數為 186 輛（一般型 160 輛；加護型 26 輛），包含消防機關 90 輛、醫療機構 44 輛、救護車營業機構 47 輛及其他單位 5 輛。



Section 2 Preventing the Abuse of Emergency Resources

In response to the growing number of medical emergencies in Taipei City by year, measures had to be taken in order to improve the quality and efficiency of pre-hospital emergency treatment as well as to prevent the abuse of emergency rescue resources. The Department of Health, Taipei City Government (the Department) thus worked with the Fire Department to enact the Taipei Charging Scheme in Cases of Public Misuse of Fire Department Ambulances that entered into force on December 8, 2012. Under this Scheme, people shall be liable to pay a fee if they called 119 for an ambulance to a non-emergency responsibility hospital and if the patient had not visited the emergency room for examination. For each ambulance call out, a fee of NT\$ 1,800 will be charged. The Department also worked with the Fire Department and the Department of Social Welfare to form a Taipei City Government Emergency Rescue Evaluation Team that holds regular meetings to review suspected cases of emergency resource abuse. Frequent users of emergency rescue resources such as the homeless, non-critical patients from less privileged socio-economic backgrounds and intoxicated individuals who passed out by the roadside were subject to relevant management measures. In addition to medical treatment and evaluation of social welfare requirements, other forms of welfare such as employment, sheltering, home visits and social aid were provided. Social welfare resources were integrated to provide individual cases with proper service and counseling in order to safeguard the rights of the underprivileged and ensure a fair distribution of social resources.

According to the statistics of the Taipei City Fire Department, 50 ambulance call-out bills were issued in 2018, and all of them are paid except 8 bills.

Section 3 Ambulance Management

To establish a comprehensive emergency medical treatment system, provide legally qualified ambulance equipment and operators, and build confidence and appreciation amongst Taipei City residents for emergency medical treatment service provided by city hospitals, the Department of Health, Taipei City Government (the Department) conducted regular and unannounced inspections of personnel deployment, equipment and emergency treatment services of hospitals under its jurisdiction, supervised and evaluated emergency responsibility hospital and ambulance operating organizations, and increased the stringency of management measures.

By the beginning of 2018, there were a total of 192 ambulances in Taipei City and all have been routinely inspected as required by law with 100% compliance rate. The 192 ambulances have also been subjected to random inspection with 100% compliance rate.

Under the guidance of Taipei City, there are six legal ambulance companies, including Renguang, ES, Lian An, Hexing, Jun Long and Star of Life. There are 4 other ambulance companies that operate in Taipei City from other administrations, including NineNineNine, Shunxin, HeAn and Jiean Ambulance Co., Ltd. The Department conducted supervision auditing on the aforementioned ambulance companies from November 26 through December 7, 2018. Besides uploading the evaluation result onto the website of the Department for citizens to refer to, in order to ensure Taipei City citizens' safety and rights regarding medical transportation, the results were also notified to all medical institutions (including nursing institutions) in Taipei City and nursing homes via the Department of Social Welfare as references for signing cooperation contracts with the aforementioned ambulance companies. By strengthening the ambulance auditing operation of Taipei City, the Department expects to improve the management efficiency of units (institutes) with ambulances, form accurate emergency medical operation concepts, and provide emergency medical services with outstanding quality in order to ensure Taipei City citizens' safety and rights regarding medical transportation. By the end of 2018, 24 units (institutes) at Taipei City have a total of 186 ambulances (160 common ambulances and 26 intensive care ambulances). Fire departments have 90 ambulances, medical institutions have 44 ambulances, ambulance companies have 47 ambulances and other units have 5 ambulances.





第三章 推動市民急救教育訓練

第一節 推廣全民救人觀念

為強化民衆體認CPR及AED的需要與必要性，臺北市政府衛生局分三層面進行宣導：「有沒有AED？會不會救？敢不敢救？」，期降低死亡與失能的風險，培養臺北市民對人的關懷及對生命的尊重，進而主動負起旁觀者施救之責任，提高旁觀者施救率。臺北市政府衛生局於臺北市 12 條線路之公車車體、捷運站月臺燈箱（龍山寺站及昆陽站）、捷運站月臺玻璃門（南京復興站）及臺北轉運站各樓層液晶電視等人口密集處刊登相關廣告，加強宣導「救人免責」觀念，鼓勵市民加入救人行列。推行市民急救教育訓練除由消防局、臺北市十二區健康服務中心、臺北市立聯合醫院等公家單位共同推行辦理外，衛生局另委託專業團體開發實用教案，針對不同場域人員辦理急救教育訓練，加強輔導受訓民衆，使參訓民衆充分正確練習操作，以臨危不亂應變。民國 107 年臺北市政府衛生局辦理簡版急救技能（CPR + AED）訓練 2,266 場次，參訓人員達 11 萬 7,002 人次。

市民急救技術教育訓練

Citizen First-Aid Technical Education Training





Chapter 3 Promoting Emergency Rescue Training amongst Fellow Citizens

Section 1 Promoting the Concept of All-Out Rescue Operations

In order to strengthen the people's concept of necessity on CPR and AED, the Department of Health has conducted a three-stage promotion of "Is there an AED? Can you save him? Do you dare to save him?", with the expectation to reduce the risk of death and disability, cultivate the citizens' care towards other people and their respect for life, and further actively take rescuing responsibility and improve the rescuing efficiency of bystanders. The Department issued advertisements on the buses of 12 Taipei City bus routes, lightboxes of MRT platforms (Longshan Temple Station and Kunyang Station), glass doors of MRT platforms (Nanjing Fuxing Station), LCD TVs at all floors of Taipei Transit Station and other crowded places in order to propagate the idea of "responsibility-free for saving lives" and encourage citizens in rescuing others. In addition to working with the Fire Department, health centers in the 12 districts of Taipei City, Taipei City Hospital and other public agencies, the Department also commissioned professional groups to hold emergency skill training sessions, develop practical teaching projects, and offered first-aid education targeting people from different places, so that citizens could receive more training and were capable of operating accurately and would stay calm in case of emergency. In 2018, Taipei City held 2,266 sessions of simple first-aid (CPR and AED) training for 117,002 participants.





第四章 重大災害緊急救護

第一節 災防救護建置

臺灣位於亞熱帶與熱帶交界屬於副熱帶季風區，又位於歐亞板塊與菲律賓海板塊的交界地震帶，所以天然災害頻繁，如民國 88 年發生「九二一」集集大地震，造成全國 2,000 人以上死亡，1 萬餘人受傷，造成社會衝擊影響。此外，104 年 2 月 4 日復興空難、同年 6 月 27 日八仙樂園粉塵暴燃事件亦造成多人死傷；以及 105 年 2 月 6 日臺南地震造成 551 人輕重傷，117 人死亡；107 年 2 月 6 日花蓮大地震傷患總計 295 人輕重傷，17 人死亡。當災害導致大量傷患，考驗災難現場的緊急醫療救護，以及臺北市政府災害處置應變機制，若有良好的防救災準備與緊急醫療應變計畫，則可降低災害帶來的傷亡和損失。為提升臺北市政府衛生局處理災害緊急應變能力，制定「臺北市政府衛生局災害防救業務執行計畫」及「臺北市政府衛生局『大量傷病患處理應變機制』標準作業程序」，作為處理災害防救業務之依據。災害預防、整備、應變及復建重建四階段分別敘述：



Chapter 4 Emergency Rescue for Major Disasters

Section 1 Setting Up Disaster Prevention and Rescue Measures

Taiwan is located at the subtropical monsoon region between subtropical and tropical region and at the seismic zone of Eurasian Plate and Philippine Sea Plate. As a result, natural disasters frequently take place. For example, the “921” Earthquake in 1999 caused more than 2,000 deaths and 10,000 injuries nationwide, and caused further severe social impacts. Moreover, the TransAsia Airways Accident on February 4, 2016 and the Formosa Fun Coast Explosion on June 27, 2015 also caused many deaths and injuries. The Tainan earthquake on

February 6, 2018 led to 551 minor/major injuries and 117 deaths. The Hualien earthquake on February 6, 2018 caused 295 injuries (17 deaths). When mass casualties occur due to disasters, this is a test to on-site emergency medical care ability, the disaster management and the response mechanism of Taipei City. If disaster prevention, rescuing preparation and emergency medical response plans are in place, the deaths, injuries and damages caused by disasters can be reduced. In order to improve the Department’s response capability in disaster emergency operations, the “The Department of Health, Taipei City Government Disaster Prevention and Rescuing Operation Implementation Plan” and “The Department of Health, Taipei City Government SOP on ‘Responsive Mechanism on Handling Numerous Injured Patients’” were stipulated as the basis for handling disaster prevention and rescuing operations. The plan will be explained in detail as the following in accordance to the four stages of prevention, preparation, response and recovery & reconstruction.



▲ 大量傷病患事件現場救護站演習
Mass Injury On-Site First-Aid Station Exercise





一、災害預防

（一）災害防救資料之建置與管理

無論是災前的預防或是災時的緊急應變，皆須依靠平時建置之各類防災資料，每年完成更新製作。包含：臺北市政府衛生局災害防救措施手冊、醫院緊急狀況聯絡人通訊錄、各行政區避難收容處所醫護組對應窗口連絡人通訊錄、臺北市醫療機構病床數清冊等。

（二）災害緊急通報系統

為因應臺北市天然災害及突發之重大事故時，能儘速成立緊急應變小組，協同臺北市醫療院所及急救責任醫院參與災害防救任務，建立良好的通訊網路系統，俾利資訊傳遞並提供決策者正確的判斷依據，包含：無線電通報系統、有線通訊系統、緊急醫療資訊網等。

（三）臺北市政府衛生局緊急及災難應變指揮中心（EMOC）資訊整合系統

建立臺北市政府衛生局緊急及災難應變指揮中心專屬網頁及整合防救災醫療資訊，內容包含：災難管理、急重症轉診、事件管理及通報自殺防治專線等資訊整合通報功能。

（四）醫院設施減災與補強

為確保災害發生時醫院能發揮最大的緊急救護功能並維持正常運作，臺北市政府衛生局要求轄內醫院需每年提報「災害復舊計畫」及訂定各項緊急災害應變措施，期於災害發生時，減少災害，並能立即發揮醫院緊急醫療能力。

二、整備

（一）災害應變中心作業準則

依據臺北市各級災害應變中心作業要點，訂定臺北市政府衛生局災害應變工作事項。

（二）災情通報準則

臺北市急救責任醫院、非急救責任醫院及各行政區健康服務中心制定災情通報準則，以供災害發生時緊急通報。

（三）計畫及標準作業程序之研修訂定

臺北市政府衛生局訂定災害應變相關計畫、標準作業程序及備妥相關防救災資源，當災害發生時，即可依照既定之應變計畫及程序執行各項應變行動，迅速掌握災害情況，達成災害搶救任務。





1. Disaster Prevention

(1) Disaster prevention information setup and management

Pre-disaster prevention or emergency responses to actual disasters that occur must rely on disaster prevention information generated during routine activities. Such information must be revised and updated every year and should be included in: The Department of Health, Taipei City Government Disaster Prevention and Rescue Implementation Manual, The emergency shelter in each administrative district has established contact list for liaisons of emergency shelter and medical treatment groups and list of beds available in Taipei's medical institutions.

(2) Disaster and emergency notification system

The disaster and emergency notification system must be provided to quickly establish an Emergency Response Team (ERT) and mobilize Taipei City hospitals (and health centers) as well as emergency responsibility hospitals to initiate disaster prevention and rescue missions in the event of an actual disaster. The notification system provides an excellent communication network to facilitate data transfer and provide decision makers with the information needed to make the correct judgments, and includes the following sub-systems and facilities: wireless communication system, land line communication system and emergency medical data network.

(3) Data Integration System for the Department of Health Emergency Medical Operating Center (EMOC), Taipei City Government

Separated webpages and integrated medical service information for disaster prevention and rescue were established for the Department of Health Emergency Medical Operating Center (EMOC), Taipei City Government. These webpages and data provided information on disaster management, referrals for severe or critical injuries or diseases, incident management and notification, suicide prevention hotlines and data integration and notification functions.

(4) Enhancing disaster mitigation capabilities of medical facilities

To ensure that hospitals could maintain normal operations, mitigate the potential damages and realize their maximum potential through immediate provision of emergency rescue services in the event of a disaster, the Department has requested all hospitals under its jurisdiction to submit Disaster Recovery Plans and stipulate various emergency and disaster response measures.

2. Preparations

(1) Operating standards for the Emergency Operations Center (EOC)

Disaster response tasks of the Department were stipulated according to the EOC operating requirements at various levels of the Taipei City Government.

(2) Disaster notification standards

Emergency responsibility hospitals, non-emergency responsibility hospitals and health centers of each district in Taipei City were required to stipulate standards for providing emergency notifications in the event of a disaster.

(3) Developing and amending disaster response plans and Standard Operating Procedures (SOPs)

The Department has stipulated a number of plans and SOPs for disaster response and prepared relevant resources for disaster prevention and rescue. In the event of a disaster, rescue organizations could refer to the existing response plans and SOPs to implement various response actions, assess disaster situations quickly and carry out various disaster rescue missions.



（四）防災教育訓練及演習

辦理防災教育訓練及演習以提升防災人員對災害的認知及強化防救災整備、應變能力（包含心理衛生）。每年定期督導臺北市醫療機構實施緊急災害應變演習並針對臺北市 16 家急救責任醫院及民間救護車機構進行督導考核。辦理緊急醫療救護及各項災害之相關議題教育訓練。配合臺北市政府及相關單位參與災害防救演習，包含風災、震災、核化災、氣體油料、人為事故及交通事故等。

（五）臺北市政府衛生局危機管理應變機制

為因應臺北市政府衛生局權管業務發生突發且重大事件時，建立有效因應危機管理機制，應成立緊急應變小組，並由衛生局局長指派相關人員負責。

三、應變

（一）災害防救人員編組

依各災害防救法規，臺北市政府衛生局編制有緊急應變小組、臺北市十二區健康服務中心緊急應變小組、臺北市立聯合醫院災難醫療救護隊、14 大醫事公會、民防法及全民防衛動員體系。

（二）災害應變中心成立與運作程序

當災害發生，臺北市災害應變中心成立，臺北市政府衛生局進駐醫衛環保組，負責緊急醫療救護之相關工作聯絡事項及傷病患統計等事宜。

（三）現場救護站規劃與傷病患救護

當發生災害或大量傷病患時，依災害規模臺北市政府開設前進指揮所及現場救護站，臺北市政府衛生局派員進駐以執行緊急醫療救護任務，建立現場緊急醫療救護指揮、協調系統及掌握臺北市緊急醫療動員能量，即時掌握災區緊急救護需求及臺北市緊急救護之動員能量。如災情嚴重，超出臺北市之緊急醫療救護處理能力時，臺北市政府消防局及衛生局協調、聯絡鄰近地區或鄰近縣市之救護人員、救護車及醫療機構跨區支援現場緊急醫療救護與傷患之收治，並協調衛生福利部啟動國家級災難醫療救護隊協助臺北市救護工作。





(4) Disaster prevention training and exercises

Disaster prevention training and exercises were held to improve disaster prevention understanding and strengthen disaster prevention and rescuing preparation and responsive capability (including mental health) of the rescue staffs. The Department supervises the disaster education trainings and exercises of medical institutions regularly every year and conducts audits and assessments targeting the 16 emergency responsibility hospitals and ambulance companies of Taipei City. Various emergency medical treatment and disaster related education and trainings were also held. In accordance to the disaster prevention and recessing exercises of the Taipei City Government and related agencies, it took part in typhoon disaster, earthquake disaster, nuclear and chemical disaster, gas oil, artificial accident, traffic accident, and other exercises.

(5) Crisis Management and Response Systems by the Department of Health, Taipei City Government

In response to major contingencies of the Department's operations, the Department has established an effective crisis management system as well as an Emergency Response Team (ERT) led by personnel appointed by the Commissioner.

3. Response

(1) Disaster prevention and rescue personnel

According to various disaster prevention and rescue regulations, the Emergency Response Group, Emergency Response Group of 12 District Health Centers, Disaster medical and reuse team of Taipei City Hospital, 14 medical associations, and the national defense mobility system under the Civil Defense Act are under the administration of the Department.

(2) Establishment of the Emergency Operations Center (EOC) and its operation procedure

The Taipei EOC shall be established in the occurrence of a disaster. The Department shall be stationed at the medical and environmental protection team and be in charge of communication work related to emergency medical services (EMS) and compiling of injury and disease statistics.

(3) Planning of On-site First-Aid Stations and Rescue of the Patients

When disaster or numerous injuries occurs, Taipei City Government will establish a Forward Command Post and On-Site First-Aid Station according to the scale of the disaster. The Department will assign personnel to handle emergency missions, establish on-site emergency medical commands, coordinate the whole network, and strengthen the emergency medical mobility strength in Taipei City, so that the emergency rescue demands at the disaster area and the emergency medical mobility strength in Taipei City can be monitored at all times. If the disaster is beyond the emergency medical capability in Taipei City, the Department and the Fire Department will coordinate and contact the medical personnel, ambulances and medical institutions of neighboring counties and cities to provide on-site emergency first-aid remedy, accept patients, and coordinate with the Ministry of Health and Welfare in launching the National Disaster Medical Assistance Team to assist the emergency operation in Taipei City.



（四）緊急傷病患救護與後續治療緊急動員

臺北市府衛生局及急救責任醫院於災害現場完成傷病患緊急醫療處置，持續辦理後續傷患醫治、人力及資源調度等事宜，以降低失能及災損。各醫療機構在接獲通報準備收治大量傷病患後，應立即啟動院內大量傷病患應變機制，並在接收傷患後儘速登錄傷情。接獲災區指揮官之藥品及醫材需求時，衛生局將立即調撥動員重要藥品醫材儲存處之醫院提供儲備藥品及醫材。

（五）避難收容安置計畫之配合

依據臺北市「地區災害防救計畫」，配合臺北市府教育局、社會局及各區區公所等相關單位辦理避難收容處所災民衛生保健醫療事項。

四、復健重建

能於災後迅速瞭解災情，研判災害所造成之受創、受損程度，擬訂復原重建計畫，依據標準作業程序循序完成重建計畫。

（一）災情監視、通報及處理

各級醫院之受災情形調查與處置，臺北市府衛生局提供必要之協助，使轄內之醫療功能得以正常運作，確保市民之就醫品質。

（二）受災民衆及工作人員心理重建及後續治療

由專業人員提供有心理需求的民衆心理支持，視需要開設安心會談室或安心諮詢專線及提供一線救災人員減壓服務。





(4) Emergency first-aid of the sick and injured and emergency mobilization of resources for subsequent treatment

After completing on-site emergency first-aid remedy to injured patients, the Department and First-Aid Responsibility Hospitals will carry on consequent medical remedy, personnel and resource distribution and other affairs to decrease disability and disaster damage. After each medical institution receives the notification to prepare for numerous injuries, they should immediately activate MCI mechanism and register their injuries as soon as possible after receiving the patients. When receiving the medicine and medical equipment demands from the disaster area commander, the Department will immediately mobilize staffs to redistribute hospital storage medicines and medical equipments from hospitals with important medicine and medical equipment storage.

(5) Support for Emergency Sheltering Plans

According to the “Regional Disaster Prevention and Rescuing Plan” of Taipei City, the sanitation, health and medical issues on the emergency placement of disaster victims will be carried out by the Department coordinating with the Department of Education, the Department of Social Welfare and each district offices.

4. Recovery and Reconstruction

Proper recovery and reconstruction entail quick assessment of the extent of the disaster, determining the scope and degree of damage caused and formulation of recovery and reconstruction plans. The said reconstruction plans shall be implemented according to the relevant SOPs.

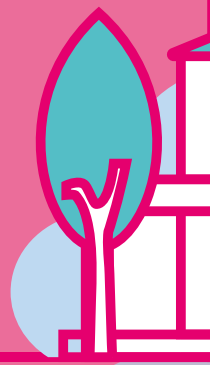
(1) Monitoring, Notification and Handling of the Disaster

The state of disasters in the hospital at various levels shall be assessed and handled accordingly. The Department shall also provide assistance where needed to ensure normal operations of hospitals under its jurisdiction and the quality of medical services provided the residents of Taipei City.

(2) Mental Reconstruction and Subsequent Remedy for Disaster Victims and Rescue Workers

Professionals shall be deployed to provide psychological support to people with such requirements. Safe consulting rooms, counseling helplines and stress alleviation services for frontline rescue workers shall be provided when they are required.

第六篇
推廣
貼心醫療



6

Popularize Cordial Medical Care





第六篇 推廣貼心醫療

第一章 整合社區關懷及醫療之可近性

第一節 社區關懷醫師整合照護

臺北市政府衛生局為照顧更多社區弱勢族群，於民國 104 年 9 月委託台灣家庭醫學醫學會推動士林區、北投區「社區關懷醫師整合性照護試辦計畫」，建構社區網絡資源，連結北投文化基金會、社福單位、在地里長、健康服務中心等團隊，並號召當地基層醫師，以健康、專業、關懷為核心，提供低收入戶、中低收入戶、身心障礙者及獨居長者整合性健康照護服務，服務內容包含院所內健康評估、居家關懷訪視、專業人員服務及電話諮詢等，期望藉由主動關懷、健康守護，成為臺北市市民最貼心的醫師朋友。

民國 106 年起授權臺北市立聯合醫院辦理「臺北市家庭責任醫師照護整合計畫」，強化弱勢族群醫師到宅訪視及跨團隊照護服務。107 年增加關懷對象包含照顧者，提供患者與家屬醫療上的幫助，亦提供支持與陪伴等功能，累計收案達 1 萬 1,852 人。除此之外，臺北市立聯合醫院亦辦理相關分享會，分享跨團隊合作模式，提供成長標竿學習，共計 154 人參加。藉由分享會加強基層醫師到宅訪視之經驗傳承與意願，107 年有 61 名基層醫師加入計畫並提供服務。



▲ 醫事人員至患者家中訪視，並提供患者及家屬相關資源與支持
Provide Relevant Resources and Support for Patient Home Visits by Medical Staff



▲ 醫師至患者家中進行訪視
Patient Home Visits by Physicians



Part 6 Popularize Cordial Medical Care

Chapter 1 Integrating Community Care and Accessibility of Medical Treatment

Section 1 Integrated Services by Community Doctors

In order to take care of more community underprivileged populations, the Department commissioned the Taiwan Association of Family Medicine (TAFM) in September 2015 to promote the “Pilot Project on the Integrated Care of Community Doctors” at Shilin and Beitou District and build up community network and resources. TAFM cooperated with Beitou Culture Foundation, social and welfare organizations, local village chiefs, health centers and other teams, gathered local doctors and provided low-income households, mid low-income households, physical and mental disabled people and seniors who live alone with integrated health caring services with the core spirit of health, professionalism and care. Services included health assessment at hospitals or clinics, home care visits, service from professional staff, telephone consultation and others. The Department expects to become the most considerate doctor friend for Taipei City citizens by actively caring for them and guarding their health.



▲ 經持續關懷訪視，患者由臥病在床已可攙扶行走

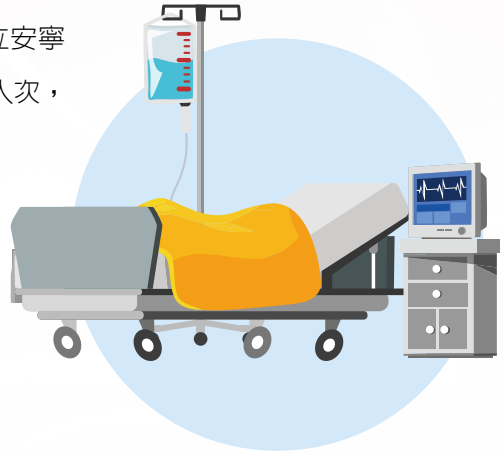
After continuous care visits, the bedridden patient is able to walk with assistance

In 2017, Taipei City Hospital was authorized to implement the “Integrated Plan for Healthcare Provided by Family Physicians” in order to improve the services of household visits by doctors to disadvantaged groups and cross-team care. In 2018, the Department has expanded the scope of care to care givers and in addition to the medical assistance offered to patients and their families, we also offer other support and companionship services to help a total of 11,852 cases. On top of that, Taipei City Hospital has also organized relevant sharing sessions to present their inter-team model of cooperation for growth and benchmark learning. A total of 154 participants attended these sessions. Through these sharing sessions, Taipei City Hospital has facilitated the sharing of experience and motivation for local doctors to visit patients at their homes. In 2018, 61 local doctors volunteered to take part in the initiative and provide their services.



第二節 安寧緩和醫療

臺北市政府衛生局推廣安寧緩和醫療，民國 107 年「預立安寧緩和醫療暨維生醫療抉擇意願書」臺北市簽署數達 1 萬 8,611 人次，配合病人自主權利法施行，積極推廣簽署預立醫療決定，為提升醫事人員相關知識與勸募技巧，辦理 5 場次醫事人員教育訓練，參訓人數共計 1,053 人，辦理社區民眾講座 12 場次，提升市民對選擇「善終」權利的認知，減少「無效醫療」的介入，並為自己做出醫療決定，參與講座人數共計 826 人。



第二章 強化醫療人文關懷

第一節 出院準備服務精進服務

臺北市立聯合醫院在病人入院初期，進行高危險群篩檢，結合專業醫療團隊，以個別化、人性化、持續性、善用資源之服務理念，在病人返家前，主動協助病人及家屬訂定出院準備服務計畫，並提供居家照護護理指導，確保病人在出院後能得到持續性的照護。依病人需求評估結果，聯結社區或長期照護資源，以達到轉介、安置之目的。透過有系統、有組織的問題解決技巧，讓病人能安心滿意的回到家中或轉介到照顧機構，以得到或保有最佳的健康狀態和生活品質。藉由出院病人電話關懷服務培養醫病良好互動關係，以改善病人健康及生活品質，提升社會資源運用。民國 107 年高風險再住院病人之出院準備收案率為 19.98%、3 日內返急診率 0.22%、電訪完成率 99.80%、服務滿意度 98.50%，高風險再住院病人之出院準備收案人數累計 1 萬 843 人，一般出院準備收案 1 萬 3,349 人。



▲ 出院準備服務主動協助病人及家屬
Discharge Preparation Service for Active Patient and Family Assistance



Section 2 Hospice Palliative Care

The Department has been promoting hospice palliative care. In 2018, 18,611 persons signed the “Form for Hospice Palliative Care and the Selection Intent of Life-Sustaining Treatment” reached 18,611. In conjunction with the Patient Right to Autonomy Act, we have actively encouraged patients to make advanced decisions. To enhance the knowledge and communication skills of medical personnel, 5 training sessions were organized for medical personnel with 1,053 participants. In addition, 12 seminars were held for community residents so that citizens could learn more about their rights of “die well”, reduce the intervention of “futile medical care”, and make medical decisions for themselves. A total of 826 persons attended the seminars.

Chapter 2 Strengthening Human-Oriented Care in Medical Services

Section 1 Improved Service of Preparation for Discharge

Upon the admission of patients, Taipei City Hospital would perform a screening for high-risk group and with the assistance of professional medical team, the hospital strives to deliver individualized, humane and sustainable services that make optimal use of relevant resources. Before patients are discharged and returned to their homes, the hospital would take the initiative to assist patients and their families by formulating a specific plan of preparation for discharge and provide guidance on subsequent home care to ensure that patients will continue to receive care after their discharge. According to the assessment on the patient's needs, the service will be connected with community or long-term care resources to reach the purpose of referral and relocation. Through systematic and organized problem-solving techniques, the hospital helps patients to return home or be referred to other care facilities with confidence in order to achieve or maintain their best physical conditions and quality of life. Taipei City Hospital endeavors to foster positive interaction with patients through telephone care services for discharged patients in order to help them improve their health and quality of life, thereby enhancing the efficacy of social resource utilization. In 2018, the reception rate of the discharge preparation service for high-risk patients came to 19.98%; 0.22% of the cases returned for emergency medical service within 3 days. Telephone interviews were completed for 99.80% of the cases with a satisfaction rate of 98.50%. Discharge preparation services were provided to a total of 10,843 high-risk patients and 13,349 normal patients.





第二節 提升醫病溝通質量

醫師與病人之間的溝通與確認，是影響醫療照護品質與病人安全重要的一環，臺北市立聯合醫院自民國 104 年 4 月起全面推動家庭溝通會議，鼓勵各病房召開緩和醫療及醫病溝通家庭會議，增進醫療團隊與病人或家屬溝通，減少因誤解而產生醫療爭議，並規劃設置具錄影設備的懇談室，於召開家庭會議時使用。辦理醫療關懷成長分享會及家庭溝通會議之



▲ 家庭溝通會議案例分享會
Family Communication Meeting Example Sharing Session

案例分享，透過經驗交流之分享、標竿學習模式及資源共享平臺，共同提升醫療品質，以達成病家、醫師及醫院三贏局面。107 年 1 月 1 日至 12 月 31 日止召開家庭會議共計 7 萬 1,807 場次。

第三節 醫療爭議調處

依據《醫療法》第 99 條，地方衛生主管機關對於醫療爭議案件，應建立醫療爭議調處機制，民衆對於醫療機構的要求，已不再侷限於醫療專業與技術知能，對於服務態度與就醫感受的注重，使得醫病關係緊張度不斷攀升；有鑑於此，臺北市政府衛生局為維護醫病關係，建立醫病信賴、友善與良性互動環境，在推動策略上朝全方位、多元化、多管道推廣，以達到醫病和諧、息爭止訟的目標，民國 107 年受理醫療爭議案件計 333 件，其中申請調處 75 件，調處後成立案件計 22 件，成案率 29.3%；醫療爭議發生科別前三名分別為牙科、整形外科及急診醫學科。衛生局設置之醫療爭議調處機制，設有法律與醫學專家參與進行調解，藉由專業客觀的第三方意見協助釐清真相，減少醫病雙方之認知差異，促進醫、病、法三贏的局面，以達到醫病和諧、息爭止訟的目標。

為增進醫病雙方和諧，持續協助醫療機構建置完善的醫療爭議關懷小組與關懷機制，民國 107 年辦理「醫療爭議關懷調解人才培訓工作坊」、「提升醫療人員醫療爭議處理知能研討會」及「醫療爭議關懷調解研討會」共 3 場次，並針對一般民衆辦理社區宣導講座共 12 場次，藉以提升醫療機構及民衆醫療爭議處理知能。



Section 2 Improving the Quality of Doctor-Patient Communication

Communication and confirmation between doctors and patients is an important aspect of medical care quality and patient's safety. Since the overall launch of the Family Communication Meeting by Taipei City Hospital in April 2015, it has encouraged each ward in holding palliative medical family meetings and doctor-patient family meetings to enhance the communication between the medical team, patients and their family members and reduce medical disputes due to misunderstanding. Meeting rooms with video recording facilities are also prepared for family meetings. In addition to that, medical care sharing sessions and family communication meeting case sharing sessions were also held. With experience sharing, role models learning and resource sharing platform, the hospital aims to achieve win-win-win for patients, doctors and the hospital by working together to improve the quality of medical care. From January 1 to December 31, 2018, a total of 71,807 family meetings were held.

Section 3 Medical Dispute Mediation

Article 99 of the Medical Care Act stipulated that local health authorities should establish medical dispute mediation systems to handle such incidents. People's expectations of medical institutions is no longer restricted to that of medical profession or technical knowledge. The focus on the attitude of medical service providers and how they feel about the services has increased confrontations between doctors and patients. To respond to this situation, the Department has initiated a number of measures to safeguard doctor-patient relationships and establish a trusting, friendly and positive environment for doctor-patient interaction. Strategies for carrying out such measures focus on comprehensiveness, diversification and multi-channel approaches in order to achieve the objective of harmonious doctor-patient relationships, settling disputes and preventing lawsuits. In 2018, there had been a total of 333 medical dispute cases; 75 of which applied for mediation and 22 cases were accepted with an acceptance rate of 29.3%. The top three specializations of medical dispute occurrence were dentistry, cosmetic surgery and emergency medicine. The Department has established a mechanism for the mediation of medical disputes with designated legal affairs personnel and medical experts to participate in mediations. The goal is to provide professional and objective opinion from an unbiased third-party to help clarify the matter and eliminate discrepancies in perception between the doctor and patient in order to achieve "win-win-win" for all parties involved, thereby attaining the objective of settling disputes and preventing lawsuits.

To facilitate harmonious relationship between doctors and patients, the Department continues to help medical institutions establish comprehensive mechanisms for medical dispute care group and care. In 2018, the Department organized 3 sessions of "Medical dispute care and mediation talent training workshop", "A seminar to help medical personnel become more cognizant on the handling of medical disputes" and "Medical dispute care and mediation workshop". Not only that, the Department has also organized 12 community dissemination sessions for the general public in an effort to help both medical institutions and the general public to develop higher awareness for the handling of medical disputes.



第三章 健全醫事體系

第一節 醫療資源及醫事人員管理

截至民國 107 年止，臺北市計有醫院 36 家、診所 3,661 家，各醫院急性一般病床總開放病床數計 1 萬 2,568 床。登記執業醫師數 1 萬 4,568 人，每萬人口醫師數為 54.58 人、每萬人口急性一般病床數為 47.09 床，醫療資源豐沛。

一、強化醫事人員執業登錄，提升辦理成效

(一) 為簡化行政流程，落實便民服務政策，除於臺北市政府衛生局及衛生稽查科 5 區聯合稽查股窗口隨到隨辦醫事人員業態異動外，更委託臺北市相關醫事公會協助辦理執業登錄，提供便捷服務。另結合公會、醫事機構協助宣導法規政策事項，增進醫事人員對法令的認知，避免觸法。

(二) 醫事人員執業登記現況：

1. 西醫師 1 萬 287 人、中醫師 986 人、牙醫師 3,318 人、呼吸治療師 353 人、醫事檢驗師（生）2,260 人、職能治療師（生）566 人、物理治療師（生）1,427 人、語言治療師 146 人、醫事放射師（士）1,455 人、護理師（護士）2 萬 9,045 人、助產師（士）28 人、聽力師 78 人、牙體技術師（生）324 人、驗光師（生）346 人，上開各類醫事人員執業登記總數計 5 萬 619 人。
2. 執業異動登記委外（共 8 類公會）辦理成果：牙醫師公會 340 件、中醫師公會 235 件、呼吸治療師公會 141 件、醫事檢驗師（生）公會 419 件、物理治療師公會 749 件、物理治療生公會 50 件、醫事放射師公會 343 件、護理師護士公會 1 萬 266 件。
3. 臺北市民國 107 年辦理執業異動案共 2 萬 6,193 件，其中委外辦理 1 萬 2,543 件，占 47.89%。

(三) 醫事人員報備支援醫療業務機制：

民國 90 年率先全國建置醫事人員線上支援報備申辦系統，99 年 6 月 1 日轉換使用衛生福利部系統。107 年報備支援申請案件 4 萬 1,939 件，其中線上申請案件 4 萬 557 件（96.7%），紙本申請案件 1,382 件（3.3%），有效落實無紙化作業，並掌握臺北市醫療資源現況及醫事人力資源。





Chapter 3 Robust Medical Systems

Section 1 Management of Medical Resources and Medical Personnel

By the end of 2018, there are 36 hospitals and 3,661 clinics in Taipei City. The overall available common acute beds for all hospitals are 12,568 beds and 14,568 registered doctors are in practice, indicating that there are 54.58 doctors and 47.09 common acute beds per 10,000 people. Taipei City has abundant medical resources.

1. Improving Medical Personnel Practice Registration to Improve Efficiency

(1) To simplify the administrative procedures and meet the policy requirements for making public services more convenient, applications for changes of medical personnel practice registration were accepted and processed upon receipt at the Department and District 5 Counter of the Joint Inspection Team. The Department also commissioned relevant medical associations to help handle the medical practice registrations. The Department worked with various associations and medical institutions to promote awareness of relevant laws and policies to help provide medical professionals with a better understanding of various regulations to avoid violations.

(2) Current Status of Medical Personnel Registration:

A. 10,287 doctors, 986 Chinese medicine doctors, 3,318 dentists, 353 respiratory therapists, 2,260 medical technologists (students), 566 occupational therapists (students), 1,427 physical therapists (students), 146 speech therapists (students), 1,455 radiologists (students), 29,045 registered nurses (nurses), 28 midwives (maternity assistants), 78 audiologists, and 324 dental technicians (students), 346 optometrist (students); the total number of the aforementioned registered medical personnel comes to 50,619 persons.

B. Progress on outsourced application for changes of medical practice registration (including 8 associations): 340 cases for Taipei Dental Association, 235 cases for Taipei Chinese Medical Association, 141 cases for Respiratory Therapists Association, 419 cases for Medical Technologist Association, 749 cases for Taipei Society of Physical Therapists, 50 cases for Taipei Physical Therapy Assistant Society, 343 cases for Taipei Association for Medical Radiation Technologists and 10,266 cases for Taipei Nurses' Association.

C. In 2018, a total of 26,193 applications for changes of medical practice registration were processed in Taipei City. 12,543 such cases (47.89%) were outsourced to external agencies.

(3) Request Support System for Medical Personnel:

In 2001, Taipei City was the first in Taiwan to construct online request support system for medical personnel and switched to use the system made by the Ministry of Health and Welfare on June 1, 2010. In 2018, 41,939 cases requested for supports, including 40,557 (96.7%) online request cases and 1,382 (3.3%) paper request cases. Taipei City has effectively implemented paperless operation and made good control of the medical resource status and medical personnel configuration of Taipei City.



第二節 密醫密護查緝及美容醫學管理

一、積極查處醫政及醫療廣告違規，加強密醫查緝及管理執行美容醫學業務之診所，維護臺北市市民醫療權益：

- (一) 臺北市政府衛生局於民國 107 年醫事違規查處案件共 1,360 件。
- (二) 監測查報醫療廣告及查緝，執行「107 年網路醫療廣告監測計畫」，以杜絕誇大不實醫療廣告；民國 107 年舉發廣告違規案件共 775 件，處分 91 件。
- (三) 執行跨區域「聯合稽查小組」密醫稽查工作：民國 102 年成立專案稽查工作機動小組進行跨局處（衛生、檢警單位）專案稽查，必要時配合檢警單位，以遏止不法情事，保障臺北市市民就醫安全。107 年共稽查 77 件，移送地檢署偵辦 4 件，臺北市政府衛生局列管查察 12 件。

二、加強管理執行美容醫學業務之診所：實地訪查進行美容醫學醫療業務之診所，並輔導業者執行具侵入性手術之療程，應設置手術室並揭示醫師學經歷，以維護民衆醫療安全；另於臺北市政府衛生局網站設置美容醫學專區，主動刊登美醫診所、衛教訊息、新聞事件提醒事項及處分名單，以達資訊透明之目的，維護民衆醫療權益。

第三節 醫療品質提升

一、臺北市政府衛生局聘請專家委員於民國 107 年 9 月 26 日至 11 月 23 日辦理 36 家醫院之醫院督導考核，督導訪查率 100%，輔導醫院落實病人安全工作，提升照護與服務品質，維護民衆安全就醫環境。



二、辦理民國 107 年臺北市基層醫療機構督導考核，包括西醫、牙醫、中醫診所及其他醫事機構，共完成 3,633 家。

三、為提升醫院環境安全管理機制及強化對緊急災害應變能力，於民國 107 年 5 月 1 日至 12 月 30 日進行 35 家醫院之實地訪查作業及辦理緊急災害實地演練輔導行程。



Section 2 Investigation of Unlicensed Doctors and Nurses and Management of Cosmetic Surgery and Anti-Aging Medicine

1. The Department actively investigated medical administration and advertisement violations, enhanced investigations on unlicensed doctors, and enhanced management on cosmetic medicine clinics to ensure the medical rights of Taipei City citizens:
 - (1) The Department investigated a total of 1,360 cases of medical violations in 2018.
 - (2) Monitored, reported and inspected medical advertisements. Implemented the 2018 Online Medical Advertising Monitoring Project to eliminate fraudulent or exaggerated medical advertising. In 2018, a total of 775 advertising violations were reported and 91 were penalized accordingly.
 - (3) Implemented cross-regional investigation on unlicensed doctor by "Joint Investigation Team": In 2013, a project investigation operation mobility team was formed to conduct cross-regional (including health, police and prosecutor units) project investigations. When necessary, this team will cooperate with police officers and prosecutors to prevent illegal behaviors and ensure the medical safety of Taipei City citizens. In 2018, 77 cases were investigated, 4 were transferred to the District Prosecutor Office for further investigation, and 12 cases were listed for further investigation by the Department.
2. Enhancing Cosmetic Medicine Clinics Management: The Department visited cosmetic medicine clinics, instructed practitioners on the course of treatment in conducting invasive surgeries, demanded that surgery rooms should be set up, and demanded that the academic and practice experience of the doctors should be disclosed to ensure the medical safety of the citizens. In addition to that, a cosmetic medicine special corner was added on the website of the Department and actively published information regarding cosmetic medicine clinics, health education, news events, reminders and list of punished practitioners to reach the target of information transparency and ensure the people's medical rights.

Section 3 Improvement in the Quality of Medical Care

1. The Department hired a committee of experts to supervise and audit 36 hospitals between September 26 and November 23, 2018 and the rate of supervision visits rate was 100%. They guided hospitals to implement patient safety measures and improve their healthcare service qualities, in order to ensure a safe medical environment for the citizens.
2. 2018 audits and supervision on primary medical institutions of Taipei City were held, including Western medicine, dentist, Chinese medicine and other medical institutions. Audits and supervision on 3,633 institutions were completed.
3. To improve hospital environment safety management mechanism and strengthen emergency disaster response capability, the Department conducted field visits and provided guidance on field exercise of emergency disaster response to 35 hospitals between May 1 and December 30, 2018.



四、「醫事檢驗業務品質輔導訪查」於民國 107 年 7 月 16 日至 7 月 25 日完成，共訪查 20 家醫事檢驗機構，並將專家評定意見及建議事項，函請機構改善。

五、「醫事放射業務品質輔導訪查」於民國 107 年 6 月 19 日至 7 月 6 日完成，共訪查 33 家醫事放射機構，並將專家評定意見及建議事項，函請機構改善。

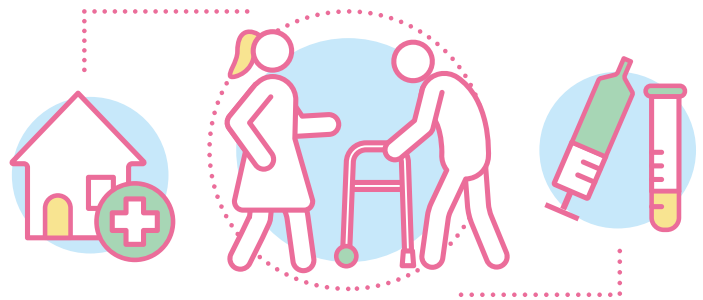
第四章 聯醫、萬芳、關渡

第一節 臺北市立聯合醫院

臺北市立聯合醫院自民國 94 年整合至今計有 7 個院區（5 個綜合院區：中興、仁愛、和平婦幼、忠孝及陽明院區；2 個專科院區：松德、林森中醫昆明院區）、13 個院外門診部、1 個兒童發展評估療育中心、3 個職能工作坊、1 個庇護工場、1 個學苑、4 個附設護理之家、1 個精神護理之家、3 個附設產後護理之家、6 個附設居家護理所及 1 個昆明防治中心，服務網絡遍及臺北市 12 個行政區域。秉持公立醫院成立之精神與存在價值，配合國家政策推動公共衛生業務，整合醫療資源提供臺北市市民優質的醫療服務，並積極照顧弱勢族群，型塑公衛醫療相輔相成的照護典範，並致力提升健康照護品質。

一、走入社區，照顧有醫療需求但行動不便的市民

臺北市市長柯文哲期許，讓臺北市每個家庭都有醫師朋友，特別是弱勢的家庭。臺北市立聯合醫院自民國 104 年 4 月起推動「醫院型家庭責任醫師」制度，依個案需求提供跨團隊整合服務，主要收案對象包括低收入戶、獨居長者、重度身心障礙者或經醫事人員評估有明確醫療需求者。107 年度共有 3 萬 6,265 位民衆簽署家醫計畫同意書；提供 5,201 位有需求的弱勢族群到宅服務，其中醫師出訪共 1 萬 4,045 人次、非醫師專業人員出訪共 2 萬 4,253 人次。



為拓展服務能量，臺北市立聯合醫院於民國 105 年新增居家醫療服務，由專業醫療團隊評估後，提供有需要的個案到宅醫療服務，截至 107 年底共收案 4,631 名個案、服務 3 萬 9,486 人次。107 年更以「藍鵲送愛－建構居家醫療照護整合服務模式」為題，榮獲「2018 年國家品質標章銅獎」。



4. The “Guidance and Visit for Quality of Medical Examination Service” was completed during the period between July 16 and July 25, 2018. 20 medical examination institutions were visited, and letters containing expert comments and suggestions were sent to the institutions, which were asked to make improvement.
5. The “Guidance and Visit for Quality of Medical Radiology Service” was completed during the period between June 19 and July 6, 2018. 33 medical radiology institutions were visited, and letters containing expert comments and suggestions were sent to the institutions, which were asked to make improvement.

Chapter 4 Taipei City Hospital, Wanfang Hospital and Gandau Hospital

Section 1 Taipei City Hospital

Since the integration of Taipei City Hospital in 2005, it now operates 7 branches (5 comprehensive branches of Zhongxing, Renai, Heping Fuyou, Zhongxiao and Yangming; 2 specialized branches of Songde and Linsen Chinese Medicine Kunming branch), 13 external clinics, a Children Development Assessment Treatment Center, 3 occupational workshops, a sheltered workshop, an academy, 4 affiliated nursing homes, an affiliated psychiatric home, 3 affiliated postpartum nursing care centers, 6 affiliated household nursing centers along with the Kunming Prevention and Control Center to form a service network that stretches throughout all 12 districts of Taipei City. Upholding the spirit and value of a public hospital, Taipei City Hospital coordinates with national policies in promoting public health operations, integrates medical resources to provide Taipei City citizens with outstanding medical services, actively takes care of underprivileged populations, establishes the care role model for public health and medical service collaboration, and devotes itself to improving healthcare quality.

1. Walk into communities to help citizens who move with difficulty but have medical demands

Taipei City Mayor Wen-Je Ko expects that each family in Taipei City should have their own family doctor, especially the underprivileged families. Since April 2015, Taipei City Hospital has promoted “Hospital-Based Family Physicians Systems” to providing cross-team integrated services according to the case's demand. The system caters primarily to targets including low-income households, seniors who live alone, severely physically and mentally disabled people and individual cases that were evaluated by medical staffs who have precise medical demands. In 2018, a total of 36,265 citizens signed the Family Physician Agreement and home services were provided to 5,201 underprivileged people with need. Among the services provided, doctors visited 14,045 times while non-doctor professional staffs made 24,253 times.

To expand its service capacity, Taipei City Hospital added home medical services in 2016. After being assessed by professional medical team, home medical services will be provided to the cases in demand. By the end of 2018, 4,631 cases were taken and provided services 39,486 times. In 2018, taking on the theme of “Blue Magpie Delivering Love: Constructing Home Medical Care Integrated Service Model”, the service was awarded with the recognition of 2018 Symbol of National Quality - Bronze Prize.



二、推動「都會型社區安寧照護」

在臺北市立聯合醫院總院長黃勝堅帶領下，自民國 104 年起率先啟動「都會型社區安寧照護」計畫，截至 107 年共計有 2,423 位各職類同仁完成健保乙類社區安寧 13 小時訓練，投入照護人力 291 名，107 年出隊訪視 4,745 次，各專業人員共出勤訪視 1 萬 8,341 人次。克服都會型社區推動安寧的各種困難，讓希望能在家人善終的末期病人，都能獲得完善的安寧照護，107 年持續照護人數共 651 人。同時鼓勵聯合醫院內同仁投入研究，107 年度有 50 篇以上的研究論文產出，為聯合醫院社區安寧照護團隊提供堅實的後盾，計畫以「無框架的愛—都會型社區安寧照護在臺北」為題，榮獲 2018 年國家品質標章認證。107 年以「都會型社區安寧照護」為主題，榮獲第一屆政府服務獎專案規劃類得獎機關。參與 2018 年第 13 屆亞洲及太平洋區安寧療護會議，共有 46 篇被接受論文（46 / 576；8.0%），36 人出席；其中有 3 篇入選 best poster competition（3 / 10；30%）。



三、推動「與醫學中心（臺大醫院）轉診計畫」

為緩解急診壅塞問題，廣續承接臺北市政府四年新政其中之一「與醫學中心（臺大醫院）轉診計畫」，回到以人為中心的制度。民國 104 年 1 月 19 日起由中興院區先行試辦，同年起綜合院區均加入計畫。105 年及 106 年持續推動該計畫，經由診治醫師建議，讓在臺大醫院急診室等床的病人，先到聯合醫院接受住院治療，等臺大醫院有床後仍可選擇轉回。107 年度臺大醫院已成功轉介 516 名病人入住臺北市立聯合醫院，出院後回診率 75.9%，病人或家屬對該項轉診滿意度 92%，並榮獲 2018 年國家品質標章續審認證；106 年起新增陽明院區與醫學中心（新光醫院）合作轉診計畫，107 年度新光醫院已成功轉介 59 名病人入住臺北市立聯合醫院。

四、長照藥事服務、到宅提供用藥指導

因應高齡化社會，藥師走入社區執行藥事照護服務，就用藥高關懷族群、獨居長者或弱勢族群等需要照顧之個案，進行藥物使用評估、雲端藥歷處方整合，查檢重複用藥、交互作用，提供病人及家屬用藥指導、藥物諮詢、藥品管理建議，確保用藥安全。自民國 104 年 5 月起，提供居家訪視藥事照護服務，107 年共有 51 位藥師進入病人居家處所，提供藥物管理及評估服務，計 715 人受訪，共訪視 1,882 人次。服務對象以中高年齡病人（18.69%）占多數，其次為三高病人（16.14%）及三高併大於兩種慢性病病人（11.54%）；病人整體滿意度達九成九；另調查發現有九成八以上的病人表示有幫助，近九成七希望藥師再訪。臺北市立聯合醫院於 107 年臨床藥學年會投稿，關於居家及獨居失能藥事照顧壁報展示共錄取 7 篇。



2. Promote “Metropolis Community Palliative Care”

Under the leadership of Director Sheng-Jian Huang of Taipei City Hospital, Taipei City Hospital was the first to launch “Metropolis Community Palliative Care” project in 2015 and as of the end of 2018, a total of 2,423 associates from different divisions have completed the 13-hour B-type community palliative care training of the National Health Insurance and invested in 291 staffs. In 2018, a total of 4,745 team visits were made, along with 18,341 visits made by different professional personnel. Overcoming the various difficulties in promoting Metropolis Palliative Care, the Department hopes to allow late stage patients who desire to rest in peace at home to receive comprehensive palliative care. In 2018, palliative care has been provided to 651 people. At the same time, the Department also encourages hospital colleagues to involve themselves in relevant academic researches. In 2018, associates of Taipei City Hospital published more than 50 journal articles and provided a firm backbone for the community palliative care team. The project took the title of “Love without Frame - Community Palliative Care in Taipei City” and received the 2018 Symbol of National Quality. In 2018, the initiative took on the theme of “Metropolis Community Palliative Care” and the Department became a recipient of the 1st Government Service Award in the category of project planning. The Department participated in the 13th Asia Pacific Hospice Conference in 2018, with 46 articles accepted (46/576; 8.0%). 36 representatives attended the conference and 3 articles were chosen for the best poster competition (3/10; 30%).

3. Promotion of “Referral Project with Medical Center”

In order to solve the problem of over-crowded emergency departments, the Department has continued to implement the “Referral Project with Medical Center (National Taiwan University Hospital)”, which has been one of the new policies of the Taipei City Government in 4 years. It seeks to return to a human-oriented system. On January 19, 2015, Zhongxing Branch was the first to implement this trial, followed by all comprehensive branches within the same year. The project continued to be implemented in 2016 and 2017. With advice from doctors, patients who are waiting for beds in the emergency rooms of NTU Hospital have been referred to Taipei City Hospital to receive inpatient treatment. They were still able to choose to be transferred back to NTU Hospital once beds are available. In 2018, NTU Hospital successfully referred 516 patients to be hospitalized at the Taipei City Hospital, and the rate of revisit to the Taipei City Hospital after discharge was 75.9%. The patients' and family members' satisfaction of this referral system was 92%. The project won the 2018 Symbol of National Quality in a subsequent review. Starting from 2017, the referral project was extended to Yangming Branch and Medical Center (Shin Kong Wu Ho-Su Hospital) and Shin Kong Hospital had successfully referred 59 patients to Taipei City Hospital in 2018.

4. Long-term care pharmaceutical service and provided home services on drug use instructions

In response to the aging society, pharmacists have walked into communities to carry on pharmaceutical care service. Targeting intensive-concern medication groups, seniors who live alone, underprivileged populations and other cases that needed care, medicine usage assessments were conducted and integrated with cloud-based medication history and prescriptions to check repeated medication and interactions, provide patients and family members with medication instruction, medicine consultation, medicine management and suggestions, and ensure the patient's medication safety. Since May 2015, home visit pharmaceutical care service has been provided. In 2018, a total of 51 pharmacists have entered the patients' residence and provided medical management and assessment services. A total of 715 people were visited and visited 1,882 times. The majority of service recipients were middle-aged and elderly patients (18.69%), followed by three-hyper patients (16.14%) and patients with three-hyper and two or more chronic illnesses (11.54%). The patients' overall satisfaction rate reached 99%. Survey of patients' rate of satisfaction showed that 98% felt the service to have helped and nearly 97% of them hoped for a revisit by pharmacists. Taipei City Hospital submitted a number of articles during the annual meeting of the Taiwan Society of Health-System Pharmacists in 2018 and 7 submissions on home and care for disabled patients in solitude wall posters were chosen.

五、照顧社區弱勢族群

(一) 社區整合照護：

建立以醫療為主軸的社區整合照護模式，深入社區走主動發掘失能長者需求，訂定個別化服務計畫並媒合所需資源，解決就醫不便問題，連結社區長期照顧資源，落實在地老化、在宅臨終等目的，建構在地老化最佳的社區照顧模式。臺北市立聯合醫院共有 6 個院區參與長期照顧 A 級中心，截至民國 107 年 12 月止，收案數 2,668 案。

(二) 獨居長者送餐：

臺北市立聯合醫院結合老人服務中心、社福團體及鄰里辦公處，共同為獨居長者提供送餐服務，營養師依長者不同需求調配各式餐食，以符合長者所需之營養。自民國 99 年起提供獨居長者送餐服務，服務範圍包括士林區、中正區、萬華區、大同區、大安區及信義區。107 年共服務 3,982 人次，9 萬 8,734 餐次。

(三) 遊民健康照護：

自民國 99 年起以中興院區為首，組織跨領域合作團隊，結合臺北市府社會局及公、私立輔導部門，提供遊民傳染病篩檢，透過篩檢陽性個案之轉介及追蹤，另就慢性病部分，安排醫師與營養師分別進行健康衛教講座與機構健康飲食建議。107 年遊民健康篩檢服務共篩檢 297 人次及追蹤服務，確認 5 人感染梅毒、1 人感染愛滋病，皆由醫院追蹤並穩定控制病情中。於萬華區設置弱勢醫療服務站，提供遊民醫療篩檢與諮詢服務，107 年共服務 132 人次。

六、社區健康促進及衛教宣導活動

(一) 用藥安全宣導：

結合社區共同合作，提供院內、學校、社區或機構「用藥安全暨反毒、藥物濫用防制」教育宣導，避免藥物濫用產生藥物不良反應，以確保藥物使用的安全性，建構健全的安全用藥環境；民國 107 年共辦理 152 場。



(二) 傳染病防治：

加強四段七級之預防工作，提升民衆傳染病衛生教育知識，至社區、學校、人口密集機構提供衛教宣導，如：愛滋病、性病、結核病等各式傳染病宣導等；民國 107 年共辦理 243 場。

(三) 未成年婦女生育衛教宣導：

提供青少年兩性教育健康講座、未成年懷孕防制等預防宣導；民國 107 年共 14 場。



5. Caring for Under-Privileged Members of the Community

(1) Community integrated care:

The Department has established medicine-based model of community integrated care in order to reach deep into different communities to proactively seek out disabled seniors and establish individualized plans of service before relevant resources can be matched to their needs in order to resolve their difficulties in seeking medical help. By linking relevant community resources for long-term care, we strive to create the best community care model for aging in place and passing away in home. Taipei City Hospital operates 6 branches involved in collaboration with Tier A long-term care centers and as of December 2018, the hospital has had a total of 2,668 cases.

(2) Meal delivery services for elderly people living alone:

Cooperating with senior service centers, social welfare organizations, professional nutritionists arrange meals according to the different necessities of the seniors, providing them with the nutrients they need to keep them healthy. Starting from 2010, meal delivery services have been provided to seniors living alone, and the service area included Shilin District, Zhongzheng District, Wanhua District, Datong District, Daan District and Xinyi District. In 2018, this service served 3,982 people and provided 98,734 meals.

(3) Healthcare for the homeless:

Starting with Zhongxing Branch in 2010, a multidisciplinary team was organized, combining Department of Social Welfare, Taipei City Government and various public and private counseling departments, in providing infectious disease screening to the homeless. Cases that have positive diagnosis will be transferred and tracked in order to construct a community epidemic prevention network. Targeting chronic disease, doctors and nutritionists were arranged to provide health and sanitation lectures and institutional health diet advices with the expectation of establishing homeless assistance institutions in 2018, homeless health screening services and tracking services were provided to 297 persons. It was confirmed that 5 were infected with syphilis and 1 were infected with HIV/AIDS. All of them were hospitalized, tracked and are steadily under control. Medical service station for disadvantaged populations was installed at Wanhua District to provide the homeless with consistent medical screening and consultation service. In 2018, 132 persons were served.

6. Community Health Promotion and Health Education and Promotional Activities

(1) Medication Safety Promotion:

Cooperating with communities in providing hospitals, campus, communities or institutions “Medication Safety and Anti-Drug, Drug Abuse Prevention” education and promotion in order to disseminate the concept of adverse reaction that can occur due to drug abuse and the importance of safe medication. In 2018, a total of 152 sessions were held.

(2) Communicable Disease Control:

The 4-phase 7-level prevention operation was strengthened to improve the people’s knowledge on communicable diseases and health education. Related health education and promotions, such as AIDS and STD promotion events, tuberculosis health education and promotion, and various communicable disease promotions were actively conducted at communities, schools and crowded institutions. In 2018, 243 sessions were held.

(3) Underaged Women Fertility Health Education and Promotion:

Given that increasing number of teenagers has sexual experience, gender education health courses, under aged contraception and other preventive promotions were provided. In 2018, 14 sessions were held.



（四）癌症篩檢：

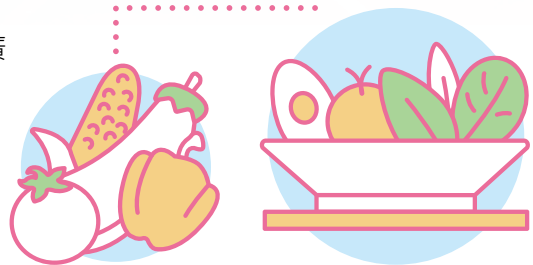
辦理癌症篩檢活動，達到及早發現、及早治療之目的。民國 107 年四癌總篩檢量 11 萬 5,075 人次，子宮頸抹片 4 萬 1,067 人、乳房攝影 1 萬 3,869 人、大腸癌篩檢 4 萬 8,262 人及口腔癌篩檢共 1 萬 1,877 人，總陽追率達 90.97%，子抹陽追率 91.79%、乳攝陽追率 89.13%、腸篩陽追率 82.95% 及口篩陽追率 100%。中興院區、仁愛院區、和平婦幼院區、陽明院區及忠孝院區榮獲「臺北市 107 年推動癌症防治績優醫院暨十二區健康服務中心品質提升獎勵」。

（五）心血管疾病暨代謝症候群防治：

結合社區相關資源，辦理三高及慢性腎臟病防治宣導活動；民國 107 年共辦理 29 場。另提供糖尿病病人全方位照護，107 年照護人次共 2 萬 4,697 人次。

（六）健康飲食新文化宣導：

透過輕鬆、活潑有趣及生活化的宣導，深入社區推廣「天天 5 蔬果」健康飲食觀念，教育民衆建立正確飲食習慣。民國 107 年共辦理 72 場，參加人數共 3,947 人，滿意度達 97.8%。



（七）健康減重等講座活動：

辦理健康體位宣導、系列體操等活動，提供學校、社區銀髮、鄰里民衆健康觀念；民國 107 年共辦理 120 場。

（八）菸害防制宣導：

透過各項宣導活動，加強民衆正確的認知，培養良好習慣，預防及降低菸害之發生；民國 107 年辦理菸害防制宣導及二代戒菸治療宣導共 108 場。





(4) Cancer Screening:

Cancer screening services were provided to achieve the goal of early detection and early treatment. In 2018, a total of 115,075 persons were screened for the four cancers, 41,067 persons took Pap smear tests, 13,869 persons underwent mammography examinations, 48,262 persons took colorectal cancer screening examinations, and 11,877 persons took oral cancer screening examinations. The total tracking rate of positive cases was 90.97%, while the tracking rates of such cases for Pap smear tests, mammography, colorectal cancer screening and oral cancer screening were 91.79%, 89.13%, 82.95% and 100%. The Zhongxing Branch, Renai Branch, Heping Fuyou Branch, Yangming Branch and Zhongxiao Branch received the “2018 Award for Improvement of the Quality of Hospitals With Excellent Performance in Cancer Prevention and Health Service Centers in 12 Districts of Taipei City”.

(5) CVD and Metabolic Syndrome Prevention:

Combining related community resources, three-hypers and CKD prevention promotion events were held. In 2018, 29 sessions were held. Comprehensive care is offered to patients with diabetes. In 2018, care services were provided to 24,697 persons.

(6) Promoting New Healthy Diet Culture:

Through relaxing, interesting and lively promotions, the healthy diet concept of “5 Vegetables and Fruits Every Day” were promoted in communities to build up correct diet habits. In 2018, 72 sessions were held, 3,947 people participated and the satisfaction rate reached 97.8%.

(7) Healthy Weight-Losing and Other Events:

Healthy body type promotion, series gymnastics and other events were held to provide schools, community seniors and common citizens with healthy ideas. In 2018, 120 sessions were held.

(8) Tobacco Control Promotion:

Various promotion events were held to enhance the people's correct understanding, build up good habits, and prevent and reduce the occurrence of tobacco hazards, so that the health of all Taipei City citizens can be improved. In 2018, 108 sessions of tobacco control promotion and second generation quit smoking treatment promotions were held.



七、追求永續經營、持續學習與成長

（一）成立「跨領域擬真教育發展中心」

臺北市立聯合醫院為提高醫療服務品質及醫療效能，成立「跨領域擬真教育發展中心」，推廣各職類同仁臨床擬真活動，於人文教育、關懷溝通教育及醫院行政管理教育之臨床場域應用，最終實踐於病人及其家屬之醫療照護。



為提供院內從事醫療照護之醫護、醫事、行政等各類同仁，進行緩和醫療家庭會議及醫病溝通之實質演練與經驗分享。該中心培訓符合未來院內醫學教育教學相關活動所需的標準化病人（演員），辦理標準化病人訓練工作坊及精進工作坊，截至民國 107 年，標準化病人團隊訓練人數達 136 人，訓練師更與跨職類單位合作進行跨領域專業職類 OSCE 教案教學課程教學與討論。

藉由模擬真實的臨床情境或複製整個醫療事件，提供院內醫療團隊教學，並發展相關教育訓練多元化教材，目前透過安寧、醫病溝通、同理心等相關課程，利用雙向互動及實作演練方式進行教學，創造與他院相異之教學發展特色，並發展適合國情之主客觀評核工具，達到各職類同仁服務品質與職能技巧提升之內部成長目的。107 年度於各院區巡迴，支援醫病溝通 / SDM 小劇場共 7 場次、安寧小劇場共 7 場次以及相關臨床技能測驗（OSCE）演出。

（二）成立「人文創新書院」

臺北市立聯合醫院於民國 105 年 3 月 1 日率先成立「人文創新書院」，全力投入社區健康促進、長期照護服務、居家醫療整合等十大領域，並開班授課，鼓勵臺北市市民共同參與人文創新書院，重新彩繪自己的人生。人文創新書院主要任務與目標包括專業人才（師資）培訓與認證、協助政府法規標準研訂及舉辦會議、醫事類別以外學生實習、展覽或競賽、經營讀書會與讀者平台、出版實務研究專書、創新典範研發等。107 年度 KPI 一精進流程服務效能件數共 29 件（目標值為 12 件）、健康識能計畫完成率 80%（目標值為 80%）。另辦理 3 場大師講堂（1 場精實管理），醫院精實管理（包含精實期中期末各 1 場次、體驗精實工作坊 4 梯次、種籽師資團隊輔導 20 梯次、專家團隊輔導 12 場次），健康識能種子教師培訓 2 場，健康識能院外宣講 14 場次，人文小組會議 11 場次；多媒體影音剪輯 10 部，高階主管培訓課程，亞洲第一屆精實醫療國際高峰會暨研討會，ACP 相關活動（病人自主權利法核心講師培訓課程 9 場、第二次共識會議完成預立醫療照護諮商人員訓練課程－病人自主權利法講師類 7 場、院外推廣活動 32 場次、經驗交流 2 場次、SNQ 投稿 / 發表、出版教材），另協助臨床研究及發展（含失智症整合照護實務研究論文會議、居家醫療整合實務研究論文會議），期刊論文及海報發表共 9 篇，完成「專科護理師手冊」出版等。



7. Pursuing Sustainable Management, Consistent Learning and Development

(1) Establish “Cross-Field Simulation Education Development Center”

To enhance medical service quality and medical efficacy, the Taipei City Hospital founded the “Inter-disciplinary Stimulation Education Development Center” to promote the clinical simulation activity of medical associates from all divisions. It can be clinically applied to humanitarian education, care and communication education, medical administration management education, and eventually used on the medical care of patients and their family members.

The Center also provides a venue for colleagues involved in nursing, medicine and administration to host palliative medical family meetings, carry out exercises in doctor-patient communication and share relevant experiences with one another. The Center is also equipped for the training of standardized patient (actors) who would be needed in relevant medical education trainings in the future and has held standardized patient training and improvement workshops for participants. As of 2018, a total of 136 personnel have completed the standardized patient training. Not only that, the trainers have also collaborated with other departments to teach and discuss OSCE material instruction.

Through simulation of actual clinical scenarios or duplicating the whole medical incident, the contents provided the medical team with relevant training from the simulations. Not only that, the contents can also be developed into other training and education related teaching materials. Currently, with courses such as palliative care, doctor-patient communication and empathy, mutual interactive and clinical practice methods were conducted for education and have created developmental features that differ from other hospitals. By doing so, objective and subjective assessment tools that meet Taiwan’s situation can be developed to achieve the internal development purpose of improving the service quality and skills of medical associates from all divisions. In 2018, the Center gave 7 sessions of doctor-patient communication/SDM simulations, 7 sessions of palliative care theatre and relevant performances for OSCE.

(2) Establish “Cultural Innovation Academy”

On March 1, 2016, Taipei City Hospital was the first to establish “Cultural Innovation Academy” to fully commit to ten major fields, including community health promotion, long-term care services, home medical care integration and etc. By offering relevant classes, the hospital encouraged Taipei City citizens to re-paint their life by participating in the Cultural Innovation Academy. The main mission and targets of Cultural Innovation Academy include training and identification of professional talents (teachers), helping governmental regulation and standard stipulation, holding conferences, organizing internship programs for non-medical disciplines, exhibitions or competitions, holding book clubs and reader’s platform, publishing books on practical researches, conducting R&D on innovative models and so forth. In 2018, there were 29 cases of process/service efficacy KPI improvement (target value: 12 cases) and 80% completion rate for the health literacy project (target value: 80%). The Department has held 3 master classes (1 on lean management), lean management for hospital (including 1 mid-term, 1 final, 4 batches of lean experience workshops, 20 batches of seed trainer team guidance, 12 sessions of expert team counseling), 2 sessions of health literacy seed teacher training, 14 sessions of external dissemination on health literacy, 11 meetings for the cultural innovation team, 10 multimedia titles that have been produced and edited, senior manager training, the 1st Asia Lean Healthcare International Summit and Seminar and ACP related events (9 sessions of training for core trainers on Patient Right to Autonomy Act, the completion of syllabus planning for advance care counseling personnel at the 2nd Consensus Meeting - 7 sessions for Patient Right to Autonomy Act trainers, 32 sessions of external promotions, 2 sessions of experience exchange, SNQ submission/publication, publication of teaching materials). The Department also assisted relevant clinical studies and developments (i.e. Meeting for Research Papers on Dementia Integrated Care Practices, Meeting for Research Papers on Home Healthcare Integrated Practices) by publishing a total of 9 journal articles and posters and the publication of the “Handbook for eNurse Practitioners” and so forth.



（三）成立「全觀式社區預防暨心理健康中心」

臺北市立聯合醫院於民國 106 年 8 月 1 日成立「全觀式社區預防暨心理健康中心」（以下簡稱全觀心理中心），期望建立「價值導向心理健康」之服務。結合臨床與諮商心理師，連結「醫療」、「社區」、「居家」及「長期照護系統」，提供「初段」（心理健康促進）、「次段」（心理問題偵測）、「三段」（心理問題處預），以及「四段」（悲傷輔導）的心理健康服務。

民國 107 年全觀心理中心於臺北市各地社區關懷據點提供心理健康識能宣講，共 83 場，參與人次 1,399 人次；長期照護居家心理師訪視病人 45 人次，家屬 50 人次；社區居家失智症訪視服務 52 人次。失智症病人認知復健團體共服務病人 519 人次，照顧者 342 人次；失智症照顧者情緒支持團體共服務 196 人次；參與社區居家安寧團隊訪視服務 1,066 人次。院內員工心理健康服務，包含寄送 9 封全院關懷信、10 場次員工心理健康宣導活動、組織諮詢共計 82 人次、高關懷群體追蹤管理計 83 人次、安心團體 6 人次；舉辦護理部基層主管支持團體共計 4 次團體，20 人參與；舉辦護理部新進員工心手相連團體 9 場次，104 人參與；舉辦關懷小天使團體 3 場次，33 人參與；提供員工個別心理諮商服務 299 人次。

此外，為銜接上述社區、居家、員工心理健康服務，提供院外門診部自費心理諮商門診或家訪服務，總計服務 167 人次。為將心理健康概念向下扎根，亦提供龍安國小 5 年級學童 4 堂情緒教育課程，並輔以 4 堂學童家長親職講座；與婦幼院區合作，提供親子共讀宣導 10 場次，參與人數 69 人。全觀心理中心以「全『心』啓航－全觀式社區居家心理整合服務模式」為題，榮獲 2018 年「國家品質標章－醫療院所類－醫院社區服務組」類別之認證。





(3) Establishment of “Holistic Center for Community Prevention and Mental Health”

On August 1, 2017, the Taipei City Hospital established the “Holistic Center for Community Prevention and Mental Health” (henceforth referred to as Holistic Center for Mental Health) in the hopes of establishing “value-oriented mental health” services. Combining consultation and clinical psychologists, and connecting “healthcare”, “community”, “home” and “long-term care system”, the Center provides services at “level-1” (mental health promotion), “level-2” (detection of psychological problems), “level-3” (treatment and prevention of psychological problems) and “level-4” (grief counseling).

In 2018, the Holistic Center for Mental Health has been organizing talks on mental health literacy at community care locations across Taipei City. The 83 sessions of talks were attended by 1,399 community residents. In addition, the Center also dispatched long-term care home psychologists to make 45 visits to patients and 50 visits to their families, in addition to 52 visits made by the Center to citizens suffering from dementia. The cognitive habilitation group for dementia served a total of 519 patients and took care of 342 patients; the emotional support group for dementia caretakers served a total of 196 caretakers. In addition, 1,066 residents received visits from the palliative teams in communities. With regards to mental health services provided to hospital employees, the hospital sent a total of 9 letters to all employees as a gesture to care for them, organized 10 mental health promotional events for employees, offered consultation for a total of 82 employees, tracked 83 employees in the special care group, reassurance group for 6 employees. The Center also held 4 support group sessions for entry-level supervisors in the nursing department with 20 participants, organized 9 “Heart in Hand” socializing sessions for new employees in the nursing department for a total of 104 employees; 3 sessions for “Little Angels of Care” for 33 participants and individual psychological counseling services for 299 employees.

On top of that, the Center has also offer external self-paid psychological counseling clinic and home visit services in an effort to connect the aforementioned community/home/employee mental health services. A total of 167 persons have received assistance with their mental health. In order to introduce the concepts of mental health to the younger generations, the Center has also organized 4 sessions of emotional education for grade 5 students at Long-An Elementary School supplemented with 4 sessions of parenting education. The Center also held 10 sessions of family reading for 69 participants by working with maternity and child care hospital. With the title of “Setting sail with heart - Holistic community and home integrated mental service model”, the Holistic Center for Mental Health has received the 2018 certification of Symbol of National Quality in the Hospital Community Service Group under the category of Medical Institution.



第二節 臺北市立萬芳醫院

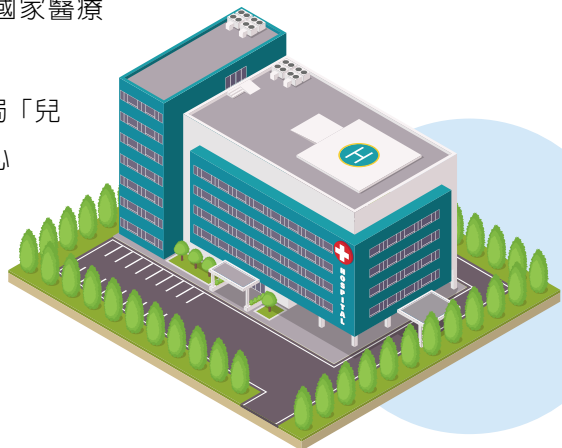
臺北市立萬芳醫院為臺北市政府第一家委託經營之公辦民營醫院，委託臺北醫學大學經營，擁有 743 床及護理之家 42 床，成立至今已滿 22 年，除了提供臺北市市民優良醫療照護，亦致力於教學研究發展與公共衛生保健服務。

一、榮耀與肯定

- (一) 民國 107 年 01 月榮獲臺北市政府衛生局「106 年度醫療安全督導考核」特優醫院。
- (二) 民國 107 年 02 月榮獲臺灣醫療品質協會「106 年醫療品質競賽「運用侵入性組合式照護降低導管相關感染初階組優品獎」。
- (三) 民國 107 年 03 月受邀臺北市政府衛生局召開「長照宅急便」記者會。
- (四) 民國 107 年 06 月通過 AAHRPP 評鑑。
- (五) 民國 107 年 07 月通過美國 JCI 國際醫院評鑑。
- (六) 民國 107 年 07 月通過 TAF ISO15189 醫學實驗室評鑑。
- (七) 民國 107 年 09 月榮獲臺北市政府衛生局「臺北市 106 年戒菸衛教服務績優醫院」。
- (八) 民國 107 年 09 月榮獲臺北市政府衛生局「常規疫苗接種協辦績優醫療院所」。
- (九) 民國 107 年 11 月榮獲維生福利部「預立安寧緩和醫療暨維生醫療抉擇意願」健保 IC 卡註記宣導優良團體。
- (十) 民國 107 年 12 月榮獲醫策會 2018 年國家醫療品質獎。
- (十一) 民國 107 年 12 月榮獲臺北市政府衛生局「兒童發展篩檢醫事機構績優獎」：醫學中心第 1 名。



▲ 長照宅急便記者會
Long-Term Care Facility Express Shipping Press Conference





Section 2 Taipei Municipal Wanfang Hospital

As the first privately operated public hospital of Taipei City Government that is managed by Taipei Medical University, Taipei Municipal Wanfang Hospital (hereinafter referred to as “Wanfang Hospital”) has 743 hospital beds and 42 other beds in its nursing home. 22 years since its founding, besides having provided Taipei City citizens with outstanding medical care, Wanfang Hospital has also dedicated itself in public sanitation and health services. Its major progresses since its establishment are as the following:



1. Honors and Recognitions

- (1) Recognized by the Department as a Distinguished Hospital in the “2017 Supervision and Assessment of Medical Safety” in January 2018.
- (2) Received the “Outstanding Entry Award” for “Application of care bundles intervention to reduce invasive catheter associated infections” in the 2017 Healthcare Quality Competition from Taiwan Healthcare Quality Association in February 2018.
- (3) Invited by the Department of Health, Taipei City Government to take part in the “Long-Term Care Home Delivery” press conference held in March 2018.
- (4) Accredited to the AAHRPP in June 2018.
- (5) Certified by U.S. Joint Commission International Hospital Accreditation in July 2018.
- (6) Accredited to TAF ISO15189 standard for medical laboratories in July 2018.
- (7) Received the “Outstanding Performance in Smoking Cessation Health Education for 2017” recognition from the Department of Health, Taipei City Government in September 2018.
- (8) Received the “Outstanding Medical Institution in the Assistance of Standard Immunization” recognition from the Department of Health, Taipei City Government in September 2018.
- (9) Named as an Outstanding Organization by the Ministry of Health and Welfare in November 2018 for “Promotion of Annotations on Hospice Palliative Care and the Selection Intent of Life-Sustaining Treatment on the Health Insurance IC Card”.
- (10) Received the Healthcare Quality Improvement Circle Award from the Joint Commission of Taiwan in December 2018.
- (11) Received the “Outstanding Performance for Child Developmental Screening Medical Institution” - 1st place in medical centers from the Department of Health, Taipei City Government in December 2018.



二、醫療與服務

秉持「品質是萬芳的尊嚴」之理念，致力提供頂尖專業的醫療服務及高品質照護：



（一）發展特色醫療、精進重難症疾病照護

1. 拓展微創手術：達文西手術、肩關節鏡手術、脊椎微創手術、乳腺切除微創手術、單孔胸腔鏡微創手術、直腸癌微創手術、唾液腺內視鏡微創手術、保留鐙骨肌腱之鐙骨手術、肝腫瘤射頻燒灼術（RFA）。
2. 腫瘤熱治療：深層溫熱治療、腹腔熱化療。
3. 重難症疾病治療：下肢淋巴水腫、複雜心房或心律不整 3D 生理電燒、左心耳封堵術、超音波溶栓術、結腸癌全結腸系膜切除手術、深層腦刺激手術、婦女尿失禁及骨盆底重建手術。

（二）結核病整合照護，承擔社會責任

1. 持續肩負北臺灣的結核病防治轉介及訓練中心，積極參與社區進階都治計畫（DOTS-Plus），為臺北區肺結核多重抗藥性（Multidrug-resistant Tuberculosis, MDR-TB）醫療照護團隊之核心醫院。此外，亦配合臺北市政府衛生局，辦理臺北市結核病及漢生病人直接觀察治療（DOTS）計畫。
2. 參與衛生福利部疾病管制署 107 年度新南向臺越結核病防治交流合作計畫，將結核病整合照護特色醫療跨越國際。

（三）提升服務效能

1. 成立聯合檢查中心：精進檢查流程、優化排程作業、設備整合運用，以縮短排程時間、提升運轉容量及服務品質。
2. 抽血取號流程再優化：採用多元報到，運用健保卡及身分證讀取方式，將電子資訊傳送櫃台系統，並增加自動判斷讀年齡及檢驗類別。
3. 擴增氣送收發站點：增設重症病房、手術室、藥局及檢驗科共 6 站，有效縮短檢體、藥品傳送時間及降低傳送錯誤。
4. 門急住診藥局數位分流叫號系統及閉環式針劑給藥系統上線，提升病患安全。
5. 建置智慧病房：提供智慧化住院照護環境，有效降低 20% 護理步數、每月呼叫鈴次數由 1,878 次降為 53 次，提升照護品質。
6. AI 醫療動態諮詢平臺：推出全臺首位工作智慧醫療服務聊天機器人—萬小芳，提供智慧化之診前筆記與診後衛教說明，提升就診便利性。



2. Medical Treatment and Services

Driven by the philosophy of “The pride of Wanfang lies in quality”, the hospital is dedicated to offering cutting-edge and professional medical services and quality care:

(1) Development of specialty care and refinement of critical care

- A. Expansion of minimally invasive surgery: Da Vinci surgery, shoulder arthroscopy surgery, minimally invasive spine surgery, minimally invasive prophylactic mastectomy, minimally invasive uniportal thoracoscopic surgery, minimally invasive surgery for colorectal cancer, sialendoscopy, stapes surgery that leaves the stapedius muscle intact, radiofrequency ablation (RFA) for lung tumors.
- B. Hyperthermia as treatment for tumor: deep hyperthermia, hyperthermic intraperitoneal chemotherapy.
- C. Treatment for critical illnesses: lower limb lymphoedema, 3D physiological electrocauterization for complicated atrial fibrillation/cardiac dysrhythmia, left atrial appendage occlusion, ultrasound assisted thrombolysis, complete mesocolic excision for colorectal cancer, deep brain stimulation, women suffering from UI and pelvic floor reconstruction surgery.

(2) Shouldering social responsibilities through integrated care for TB

- A. Continued to serve as the referral and training center on tuberculosis of Northern Taiwan. It actively participated in DOTS-Plus and was the core hospital of Multidrug-Resistant Tuberculosis (MDR-TB) medical team in the Greater Taipei Region. Moreover, coordinating with the Department is also carried out the tuberculosis and leprosy patient DOTS project of Taipei City.
- B. The hospital has taken part in Ministry of Health and Welfare's Centers for Disease Control's Taiwan-Vietnam Collaborative Tuberculosis Prevention Program in the New Southward Policy for 2018 to deliver its TB integrated care specialty to the international stage.

(3) Improve service efficacy

- A. Initiation of a joint-examination center: by refining various examination processes, optimizing scheduling operations and integrating equipment/apparatus utilization, the hospital is able to reduce scheduling time, increase operational capacity and improve service quality.
- B. Further optimization of existing process of ticket dispensing for blood test: by introducing a variety of reporting methods, patients can use their health insurance card/personal ID card for data access and transmission to the counter along with automatic age identification and examination category.
- C. Setting up additional pneumatic tube inbound/outbound tube stations: the hospital has set up six additional stations at the ICU, operating room, pharmacy and laboratory division to effectively reduce the transmission time for specimens/medications while reducing potential transmission error.
- D. Digital routing for ticket dispensing at the pharmacy for out-patient clinic, emergency, and admission and closed-loop injectable medicine dispensing launched to improve patient safety.
- E. Construction of smart ward: the hospital provides an environment for smart admission care by effectively reducing the number of steps that nursing personnel have to take by 20% and the monthly use of call bell has been reduced dramatically from 1,878 rings to 53 rings, reflecting substantial improvement in care quality.
- F. AI medicine dynamic inquiry platform: the hospital became Taiwan's first medical center to launch its working AI smart medicine service chatbot - Wan Xiaofang as a tool to provide smart pre-appointment note taking and post-appointment health education instruction to make the experience of seeking medical assistance more convenient.



（四）提供更優質的服務空間

1. 增建無障礙電梯：提供更友善就醫環境、舒緩尖峰等候時間。
2. 整建汽車停車場：採用車牌辨識系統、多元繳費方式，提供明亮便捷的停車空間，縮短車輛進場及離場時間。
3. 急診室空間整建：簡化急診動線，調整急重症動線分流，落實全科分區醫療及隱私性，並加強分區門禁管制，增設預防滋擾裝置，提升就醫安全。



▲ 急診室空間整建
Emergency Room Space Reconstruction

三、教學

- （一）一般醫學內科示範中心：自民國 95 年起，獲衛生福利部委託醫學教育學會主辦「一般醫學內科訓練示範中心計畫」，98 年起獲「一般醫學師資培育計畫」補助，99 至 100 年獲「臨床技能評估模式建置及一般醫學訓練師資培育計畫」，101 年至 105 年又再度獲得此計畫之補助，該計畫 95 年迄今共培育 390 位一般醫學師資。
- （二）定期舉辦客觀結構式臨床技能測驗（Objective Structured Clinical Examination, OSCE）
 1. 萬芳醫院臨床技能中心於民國 101 年 1 月份通過認證並成為全國二十家考場之一。105 年 12 月再次通過台灣醫學教育學會 OSCE 考場評核，認證萬芳醫院為「第一類考場」。
 2. 民國 107 年配合台灣醫學教育學會，分別於 4 月 28 日至 29 日、5 月 5 日舉辦 107 年第一次醫學臨床技能測驗，10 月 28 日舉辦 107 年第二次醫學臨床技能測驗，二次均有台灣醫學教育學會委員至考場進行訪查，107 年合計測驗四天（7 梯次），總測驗人數共 82 人。
 3. 積極辦理院內 OSCE 訓練與測驗，包括：107 年 1 月 27 日醫六實習醫學生 OSCE 測驗、3 月 24 日醫七實習醫學生 OSCE 模擬考、7 月 21 日 PGY 住院醫師 OSCE 測驗，同時協助護理、醫事檢驗、物理治療、營養職類醫事人員辦理 OSCE 測驗，107 年度考試人數共 378 人，如表 1：

(4) Offering service space of superior quality

- A. Installation of accessible elevator: this helps to create a friendlier environment for receiving medical assistance and shorten waiting time during peak hours.
- B. Renovation of the parking lot: with the introduction of license plate identification system and a variety of payment method, the hospital now provides a well-lit and convenient parking space to shorten the time of vehicle entry and exit.
- C. Renovation of the ER space: steps have been taken to simplify the line of patient motion and adjusted the route for patients with critical illnesses to achieve full zoning for different divisions and privacy while strengthening access control for all areas with the installation of devices to prevent troublemakers, thereby improving the safety of patients seeking medical help.

3. Education

- (1) General Medicine Demonstration Center: Starting from 2006, the Ministry of Health and Welfare has appointed the Taiwan Association of Medical Education to host the “General Medicine Training and Demonstration Center Project”. In 2009, Wanfang Hospital received the subsidy of “General Medicine Teacher Training Project” and received the subsidy of “Clinical Skill Evaluation Model and General Medicine Training Teacher Training Project” from 2010 to 2011, and again in 2012 to 2016. So far, this project has trained 390 medical teachers from 2006.



▲ OSCE 模擬測驗
OSCE Simulation Test

- (2) Holding Objective Structured Clinical Examination (OSCE) Regularly:

- A. Wanfang Hospital's Clinical Skill Center pass the onsite assessment and became one of the 20 OSCE national examination venues in Taiwan in January 2012. In December 2016, Wanfang Hospital once again passed the OSCE examination venue evaluation conducted by Taiwan Association of Medical Education and was classified as “Type 1 Examination Venue”.
- B. In 2018, the hospital has collaborated with Taiwan Association of Medical Education to organize the 1st Medical Clinical Skill Examination from April 28 to 29 and on May 5, followed by the 2nd Medical Clinical Skill Examination on October 28, 2018. Both exams were invigilated by members of Taiwan Association of Medical Education on premise. In 2018, the exams took place over 4 days (7 batches) in total, with 82 examinees.
- C. The hospital has been actively involved in the organization of internal OSCE training and testing, including: the OSCE test on January 27, 2018 for 6th year medical school students, the OSCE simulation exam on March 24, 2018 for 7th year medical school students, the OSCE exam on July 21 for PGY residents in addition to helping other personnel involved in nursing, medical technology, physical therapy, nutrition and so forth to take their OSCE. In 2018, a total of 378 personnel took the examination as shown in Table 1:



表 1 民國 107 年 OSCE 舉辦場次統計表

測驗日期	職類	測驗對象	測驗人數
107/01/27	西醫	醫六實習醫學生	60
107/03/17	物理治療	物理治療實習學生	4
107/03/24	西醫	醫七實習醫學生	66
107/04/28-29	西醫	醫七實習醫學生（國考）	48
107/05/05	西醫	醫七實習醫學生（國考）	10
107/05/11	營養	PGY 營養師、實習學生	6
107/07/21	西醫	PGY 住院醫師	32
107/08/04	護理	專科護理師	22
107/08/18	護理	專科護理師	51
107/09/07	營養	PGY 營養師、實習學生	13
107/10/28	西醫	醫七實習醫學生（國考）	24
107/11/10	物理治療	PGY 物理治療師、實習學生	4
107/12/08	醫檢	PGY 醫檢師	8
107/12/15	醫檢	PGY 醫檢師	8
107/12/16	藥師	PGY 藥師	17
107/12/19	藥師	藥師實習生	5
合計			378

4. 培育訓練標準病人化師資、招募及訓練標準化病人，及編寫本土化之教案，應用標準化病人於受訓學員、實習醫學生學習成效之評量。除既有西醫師 OSCE 考官之外，民國 106 年起積極培育醫事人員 OSCE 師資，使其具備教案撰寫、回饋方法及明瞭 OSCE 運作方法之能力。107 年舉辦考官培訓及標準化病人訓練課程表如表 2：

表 2 民國 107 年 OSCE 考官及 SP 訓練課程

訓練日期	課程名稱
107/01/20	標準化病人訓練師資工作坊
107/03/31	標準化病人繼續教育課程
107/06/02	標準化病人繼續教育課程
107/06/03	OSCE 考官訓練師資工作坊
107/11/11	標準化病人儲備課程



Table 1 2018 OSCE Schedule

Examination Date	Category of Specialization	Candidate Status	Number of Examinees
2018/01/27	Physician	6 th Year Medical School Students	60
2018/03/17	Physical Therapy	Physical Therapy Intern	4
2018/03/24	Physician	7 th Year Medical School Students	66
2018/04/28-29	Physician	7 th Year Medical School Students (National Examination)	48
2018/05/05	Physician	7 th Year Medical School Students (National Examination)	10
2018/05/11	Nutrition	PGY Nutritionist, Intern	6
2018/07/21	Physician	PGY Resident	32
2018/08/04	Nursing	Specialist Nurse	22
2018/08/18	Nursing	Specialist Nurse	51
2018/09/07	Nutrition	PGY Nutritionist, Intern	13
2018/10/28	Physician	7 th Year Medical School Students (National Examination)	24
2018/11/10	Physical Therapy	PGY Physical Therapy, Intern	4
2018/12/08	Medical Technology	PGY Medical Laboratory Technician	8
2018/12/15	Medical Technology	PGY Medical Laboratory Technician	8
2018/12/16	Pharmacists	PGY Pharmacist	17
2018/12/19	Pharmacists	Pharmacist Intern	5
Total			378

D. Trained teachers for training standardized patient, recruited and trained standardized patients, and edited localized teaching projects, so that standardized patients can be applied to evaluate the learning progress of trainees and clerks. In addition to the chief examiner of OSCE for Western medicine doctors, OSCE teachers for medical staff have been trained since 2017 to help them become capable of writing teaching projects, applying feedback methods, and understand the approach to OSCE operations. The 2018 chief examiner training and standardized patient training courses were held as described in Tables 2 :

Table 2 2018 OSCE Chief Examiners and SP Training Schedule

Date	Course
2018/01/20	Standardized Patient Trainer Workshop
2018/03/31	Standardized Patient Continuing Education Course
2018/06/02	Standardized Patient Continuing Education Course
2018/06/03	OSCE Chief Examiner Trainer Workshop
2018/11/11	Standardized Patient Course



5. 畢業後一般醫學訓練：配合衛生福利部一般醫學教育訓練計畫，每年培訓畢業後一般醫學學員，收訓西、中、牙、藥、放、檢、護、營、呼、物、職、心、語之PGY學員；107年均每月培訓240位學員如表3。

表3 民國107年每月平均培訓PGY學員數一覽表

職類別	西醫	牙醫	護理	藥師	醫事放射	醫事檢驗
學員數	34	14	145	17	7	10
職類別	職能治療	物理治療	臨床心理	呼吸治療	營養	語言治療
學員數	1	1	1	5	3	2

(三) 成立教師發展中心 (Center for Faculty Development, CFD)，以培育全人醫療照護師資為主軸，培育臨床教師全人醫療之觀念、人文素養、倫理與法律知識、醫病溝通及教學與研究之能力。每年舉辦師資培育課程，民國107年共舉辦63場師資培育課程、受訓人次達1萬3,533人次，臨床教師對課程平均滿意度為4.55分（5分法），共培育臨床教師人數達772位。

(四) 實證醫學中心與實證知識轉譯中心：教導臨床醫師及學生進入此領域，並進一步推廣至其他領域，除定期辦理實證相關課程，並邀請各職類共同辦理期刊俱樂部 (Journal club) 等活動；亦推廣至護理、藥劑部，成立實證護理及實證藥學，培訓多位種子教師，將實證的概念落實於臨床病人照護，萬芳醫院亦舉辦實證醫學工作坊及培訓院外實證醫學種子教師，將實證醫學之學習加以推廣及應用。

(五) 醫師及其他醫事人員教育訓練推動成效如下：

1. 民國107年訓練西醫住院醫師130位、牙醫住院醫師29位、中醫住院醫師1位。各科均訂有教學訓練計畫，每週定期進行教學，包含：晨會、住診教學、教學門診、手術教學、檢查教學、文獻討論會、病例討論會、併發症及死亡病例討論會、跨科聯合討論會與跨領域團隊訓練等教學活動，並採用客觀教學評量工具（例如：Mini-CEX、DOPS、CbD、考核表等）了解住院醫師學習成效。
2. 每學年接受近900位實習（醫）學生申請至萬芳醫院接受見實習訓練。各單位均訂有教學訓練計畫、訓練手冊及工作須知，並採導師制，更安排教學門診（門診教學）及住診教學等，著重師生會談及落實客觀學習評估（DOPS、Mini-CEX、OSCE等）之執行。107學年共計訓練372位實習醫學生、502位醫事職類見實習生。
3. 推動受訓學員（住院醫師、實習醫學生、醫事實習學生、臨床老師）建立個人學習歷程檔案 (Portfolio)，除可以檢視各科的教學成效外，並鼓勵其記錄與回顧個人的學習經歷，舉辦Portfolio競賽，並擇優獎勵。
4. 通過財團法人醫院評鑑暨醫療品質策進會「教學醫院教學費用補助計畫」，認證合格效期至民國109年12月31日。



E. Post-graduate year (PGY) general medicine training: in conjunction with the General Medicinal Education Training Project implemented by the Ministry of Health and Welfare, the hospital is involved in the training of post-graduate year students in general medicine for physicians, TCM physicians, dentists, pharmacists, radiologist, medical technician, nurses, nutritionists, respiratory therapists, physical therapists, occupational therapists, psycho therapists, speech therapists and so forth. In 2018, the hospital has been training 240 students on a monthly basis as shown in table 3.

Table 3 Number of monthly average PGY students trained in 2018

Category of Specialization	Physician	Dentists	Nursing	Pharmacists	Radiologists	Medical Technicians
Number of students	34	14	145	17	7	10
Category of Specialization	Occupational Therapist	Physical Therapy	Clinical Psycho Therapists	Respiratory Therapists	Nutrition	Speech Therapists
Number of students	1	1	1	5	3	2

(3) Center for Faculty Development (CFD) was established to nurture holistic healthcare trainers by instilling the concepts of holistic healthcare, relevant cultures, ethics and legal knowledge along with competence in doctor-patient communication, teaching and research for clinical trainers. Faculty training courses are conducted annually. In 2018, 63 faculty training courses were conducted with 13,533 trainees to train 772 clinical teachers, and the average satisfaction rate was 4.55 points (out of 5 points).

(4) Evidence-based medical center and Evidence-based knowledge translation center: The hospital has established these centers to guide clinical physicians and students to foray into this domain and promote the concept to other fields. In addition to hosting regular courses related to evidence-based medicine and inviting personnel in different specializations to organize journal club activities, the hospital has also extended the promotion to nursing and department of pharmacy by establishing evidence-based nursing and evidence-based pharmacology to train a number of seed trainers, who will be responsible for introducing the evidence-based concepts in the administration of clinical patient care. Not only that, Wanfang Hospital has also held evidence-based medicine workshop and external training for evidence-based medicine trainers to facilitate further promotion and application of the discipline.

(5) The following describes the outcome of training provided for physicians and other medical staff:

A. In 2018, the hospital has trained 130 resident physicians, 29 resident dentists and 1 resident TCM physician. Education and training plans were established for each division in conjunction with weekly instructions and activities, such as: morning calls, bedside teaching, educational clinic, operational teaching, medical testing teaching, literature discussions, case studies, complications and mortality case studies, inter-division discussion, inter-disciplinary team trainings and so forth. The hospital also uses objective teaching assessment tools (i.e. Mini-CEX, DOPS, CbD, assessment sheets and so forth) to evaluate residents' learning outcome.

B. Each academic year, the hospital accepts close to 900 intern (medical) students for their internship program at the hospital. Each division has established relevant education and training plans, training manual and guidelines along with a mentor system. Interns will also receive training through educational clinics, bedside teaching and so forth with emphasis on trainer-student conversation and implementation of objective learning assessment (through tools such as (DOPS、Mini-CEX、OSCE and so forth). In 2018, the hospital trained a total of 372 medical interns and 502 healthcare interns.

C. Promote trainees (resident doctors, interns, medical interns and clinical teachers) in establishing personal learning experience file (Portfolio). Besides being able to examine the teaching progress of each division, it also encourages them to record and review their learning experience. The hospital also organizes portfolio competition and offers winning entries with generous awards.

D. The hospital has passed the assessment by the JCT for the "Teaching Funds Subsidy Project for Teaching Hospitals", with the certification valid until December 31, 2020.



四、研究

- (一) 萬芳醫院設有臨床醫學共同實驗室、轉譯醫學研究實驗室、細胞生理與分子影像研究中心、實證知識轉譯中心及骨關節影像研究中心等，並實列各項研究計畫經費，鼓勵醫師及醫事人員和臺北醫學大學基礎學科教師進行研究合作。
- (二) 依萬芳醫院發展目標，對院內醫師及其他醫事人員參與研究訂有鼓勵辦法，設有研究發展委員會，執行推動全院研究業務，且對研究成果訂有獎勵措施，其鼓勵或獎勵應兼顧研發重點與公平性。為鼓勵院內同仁投入臨床研究，每年提供 2,200-2,400 萬元之研究經費。
- (三) 民國 107 年度以萬芳名義發表之 SCI / SSCI 期刊論文數為 290 篇，Impact Factor 5.0 以上之文章共 42 篇，其中以第一或通訊作者發表優秀論文占比高達 69%（如圖 3）。107 年期刊論文 Impact Factor 值最高之前四篇論文如表 4。

圖 3 民國 104 年～ 107 年論文發表數以圖書館 Web of Science 資料庫

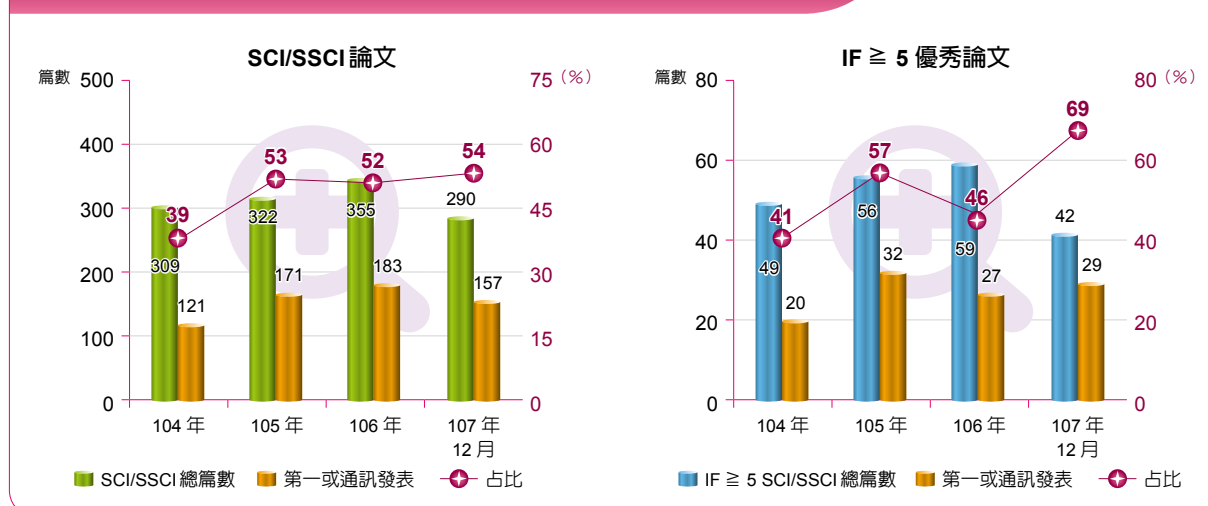


表 4 民國 107 年期刊論文 Impact Factor 值最高之前四篇論文

序次	作者	文章篇名	發表期刊及日期	影響係數
1	Huang PJ, Chang CL, Suk, FM	Polypoid lesions from the oesophagus to colon	Gut. 2018 Mar ; 67(3):552	17.016
2	Wu SY, Chou HY, Yuh, CH, Mekuria SL, Kao YC, Tsai HC	Radiation-Sensitive Dendrimer-Based Drug Delivery System	Adv Sci (Weinh).2018 Feb ; 5(2):1700339.	12.441
3	Chiang CY, Trebucq A, Piubello A, Rieder HL, Van Deun A	Should gatifloxacin be included in the model list of essential medicines?	Eur Respir J. 2018 Feb 14 ; 51(2).	12.244
4	Chiang CY, Trebucq A	Tuberculosis re-treatment after exclusion of rifampicin resistance	Eur Respir J. 2018 Feb 14 ; 51(2).	12.244

4. Research

- (1) Wanfang Hospital has established a number of facilities including its Common Laboratory for Clinical Medicine, Translation Medicine Research Laboratory, Cellular Physiology and Molecular Imaging Research Center, Evidence-Based Knowledge Translation Center, Bone Joint Imaging Research Center and so forth with budgets planned for various research projects, Doctors and medical staff are encouraged to cooperate with the teachers in the basic science fields of the Taipei Medical University.
- (2) Development goals of Wanfang Hospital were referenced in order to formulate incentives encouraging physicians and other medical staff to participate in research. Measures for rewarding research outcomes were established as well in addition to the establishment of a R&D Committee responsible for the facilitation of hospital-wide research affairs. These incentives and rewards have equal emphasis on key developmental points and fairness. In order to encourage and motivate colleagues to involve themselves in relevant clinical researches, the hospital offers NT\$22-24 million each year as research funding.
- (3) In 2018, 290 dissertations were published on the SCI/SSCI journals in the name of Wanfang Hospital, with 42 dissertations that have been chosen with Impact Factor exceeding 5.0; as high as 69% of these outstanding articles were penned by the 1st author or corresponding author (as shown in fig. 3). The top 4 dissertations published in 2018 with the highest Impact Factor are shown in table 4.

Figure 3 Number of dissertations published between 2015-2018 based on the library WOS database

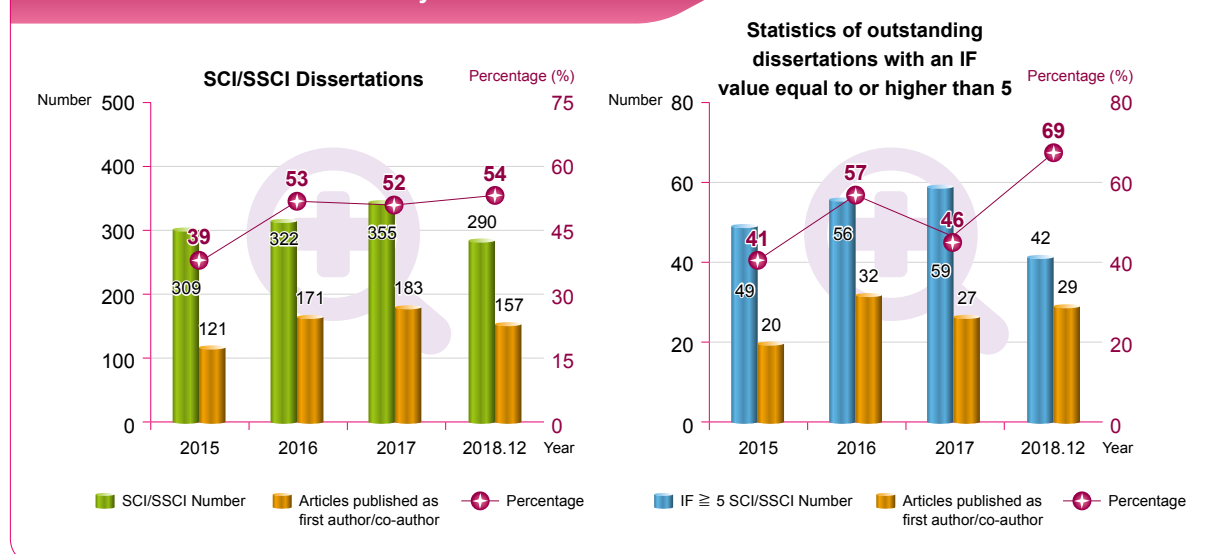


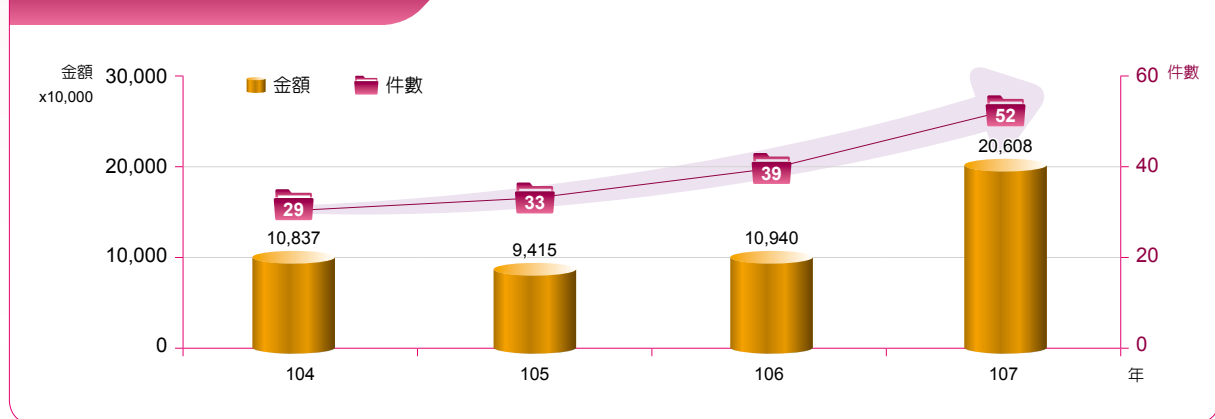
Table 4 Top 4 dissertations published in 2018 with the highest Impact Factor

No.	Author	Title	Journal and Date	IF Value
1	Huang PJ, Chang CL, Suk, FM	Polypoid lesions from the oesophagus to colon	Gut. 2018 Mar ; 67 (3):552	17.016
2	Wu SY, Chou HY, Yuh, CH, Mekuria SL, Kao YC, Tsai HC	Radiation-Sensitive Dendrimer-Based Drug Delivery System	Adv Sci (Weinh).2018 Feb ; 5 (2):1700339.	12.441
3	Chiang CY, Trebucq A, Piubello A, Rieder HL, Van Deun A	Should gatifloxacin be included in the model list of essential medicines?	Eur Respir J. 2018 Feb 14 ; 51 (2).	12.244
4	Chiang CY, Trebucq A	Tuberculosis re-treatment after exclusion of rifampicin resistance	Eur Respir J. 2018 Feb 14 ; 51 (2).	12.244



(四) 民國 107 年萬芳醫院獲國家型研究計畫補助共 52 件，總經費達兩億零六百萬元（如圖 4）。

圖 4 國家型計畫個案及補助金額



五、公共衛生服務

萬芳醫院秉持臺北市政府「公辦民營、節省公帑及回饋社會」的使命，每年投入大量經費、人力，積極辦理各項健康促進服務，茲就各服務主題分述如下：

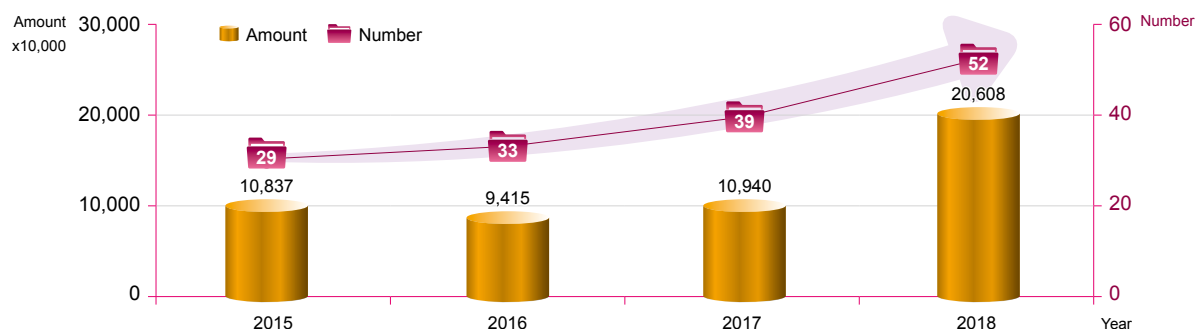
(一) 長期照護、中老年慢性病防治

1. 萬芳醫院附設護理之家，於民國 88 年 4 月經臺北市衛生局核准立案，收住對象包括腦中風患者、長期臥床的慢性病患、老邁喪失自我照顧能力者、創傷後導致植物人狀態患者、手術後或出院後仍需長期照護者（癌症末期、呼吸器依賴、精神病患等患者，因照護需求特殊，不列入照護範圍）。
2. 民國 105 年 7 月加入「全民健康保險居家醫療照護整合計畫」，跨大個案服務內涵，除了維持原本的服務模式外，更提供個案居家診療、快速領藥通關服務。107 年藥師完成居家用藥安全評估共計 172 人、總出訪次數共 8,710 次。
3. 持續參與「臺北市衛生局特約長期照顧 2.0 專業服務及喘息服務計畫」（原稱：專業人員出診訪視計畫），提供更多需要長期照護之失能者在家也能接受各類專業人員有系統的照護服務。
4. 持續承辦臺北市衛生局委託辦理社區整合照顧服務，於萬芳社區設立石頭湯服務站，自民國 106 年 5 月 11 日正式開幕持續辦理至今，107 年 11 月 23 日通過臺北市衛生局續約評鑑（榮獲優等），並成為臺北市 107 年社區整體照顧服務體系 A 級單位。107 年辦理據點內活動 140 場，共計 2,750 人次參與。
5. 辦理糖尿病防治及心血管疾病防治業務。



(4) In 2018, Wanfang Hospital received a total of 52 national research project subsidies, with total budget reaching NT\$ 206 million (as shown in fig. 4).

Figure 4 National research projects and their corresponding subsidy



5. Public Health Services

Wanfang Hospital upholds the mission of Taipei City Government for Public Organization and Private Management to Reduce Public Expenses and Contribute More to Society and has invested large amounts of money and human resources to actively implement various health promotion services. The following lists the various services provided:

(1) Long-term care and chronic illness prevention for middle-age and senior citizens

- A. Wanfang Hospital operates its Nursing Home (which was approved by the Department of Health, Taipei City Government for operation in April 1999) to take care of patients suffering from serious chronic illness such as stroke patients, long-term bed-ridden patients, those who have lost the ability to take care of themselves due to old age, patients in PVS due to trauma, patients requiring long-term care after surgery/discharge from hospital and so forth. Due to the special nature of care involved, patients suffering from terminal cancer/ventilator-dependent patients/psychiatric patients have been excluded.
- B. In July 2016, the hospital participated in the “National Health Insurance Integrated Healthcare Project” to expand the scope of its case services. Apart from maintaining its original service models, the hospital also provided home diagnosis for patients, expedited prescription pickup services and so forth. In 2018, the hospital’s pharmacists completed home medication safety assessment for 172 persons and made a total of 8,710 visits.
- C. The hospital continued to take part in the “Department of Health, Taipei City Government Contracted Long-Term Care 2.0 Professional and Respite Service Project” (formerly titled as “Professional Personnel Visit Project”) in order to ensure that disabled citizens in need of long-term care at home can also benefit from the systematic care and services of qualified personnel in their own homes.
- D. In continuation to the implementation of community integrated care services as commissioned by the Department of Social Welfare, Taipei City Government, the hospital has established the “Stone Soup Service Station” in Wanfang community. Since its inauguration on May 11, 2017, the station has been in service ever since. On November 23, 2018, the station passed the Department of Social Welfare’s contract renewal assessment with an outstanding rating and has been recognized as a Class A unit in Taipei City’s community overall care service system for 2018. In 2018, the station has organized a total of 140 events of different topics and contents, attracting a total of 2,750 participants.
- E. Implementation of diabetes and cardiovascular disease prevention.



6. 配合推動成人預防保健服務，針對高危險群個案，加強追蹤管理，期能透過早期發現早期治療，有效遏阻疾病的發生。民國 107 年受檢人次共計 3,330 人次。
7. 辦理臺北市老人健康檢查服務，每年服務量皆達 1,400 人次，107 年更達 1,600 人次。

（二）傳染病防治

1. 辦理傳染病檢體採檢。
2. 辦理傳染病防治繼續教育。
3. 辦理流感疫苗暨肺炎鏈球菌疫苗接種服務
 - （1）一樓大廳設置連續三週流感特別門診，提供一站式接種服務，並於 10 月 15 日至 11 月 26 日間於健康管理中心增設流感疫苗特別門診，共服務 1,968 人次。
 - （2）配合臺北市政府衛生局分派，協助文山區 4 家國（高）中流感疫苗作業，另協助於臺北市殯葬處第二殯儀館內員工設置企業接種站，共服務 3,213 人次。
 - （3）透過多元接種管道及宣導，民國 107 年 10 月至 12 月公費流感疫苗共計接種 7,125 劑、公費肺炎鏈球菌疫苗共計接種 516 劑。

（三）辦理四癌篩檢服務及癌症防治教育宣導活動

1. 民國 107 年 1 月至 12 月共辦理 64 場宣導癌症防治相關教育宣導活動。
2. 民國 107 年 1 月至 12 月子宮頸癌篩檢人數共 1 萬 1,439 人；乳癌篩檢人數共 4,647 人；大腸癌篩檢人數共 9,618 人；口腔癌篩檢共 1,726 人。

（四）提供優生保健及兒童預防保健服務。

（五）提供精神衛生服務，包括醫療服務、社會工作服務、臨床心理服務、職能治療服務等。

（六）辦理年度徵兵作業體檢。

（七）其他衛生主管機關計畫。

六、社會責任

- （一）配合國家衛生政策及社區民眾之需求，持續與社區領袖推動健康促進衛教活動，如多元化之健康衛生講座、健康促進活動等。
- （二）持續與文山區社區領袖共同推動居民正確用藥認知計畫，以增進社會大眾正確用藥的觀念與行為。



F. In conjunction with the promotion for preventive care services for adults, the hospital has strengthened relevant follow-up and management for high-risk cases in the hopes of effectively preventing the diseases through early discovery and preemptive treatment. In 2018, a total of 3,330 citizens completed relevant checkups.

G. The hospital has been implementing health check-ups for senior citizens, serving as many as 1,400 citizens each year. In 2018, the number of seniors served reached 1,600.

(2) Communicable disease prevention

A. Collection and testing of specimens of communicable diseases.

B. Organized continuing education on the control of communicable diseases.

C. Organized influenza and *Streptococcus pneumoniae* vaccination services.

(A) The influenza special clinic was held for three consecutive weeks at lobby of the hospitals 1F to provide one-stop vaccination service. In addition, an additional influenza special clinic was offered between October 15 and November 26 at the health management center, serving a total of 1,968 persons.

(B) The hospital collaborated with the Department of Health, Taipei City Government to assist 4 junior and senior high schools in Wenshan District to provide influenza vaccination services. Not only that, the hospital also helped employees at Taipei City Mortuary Services Second Funeral Parlor to setup a business vaccination station, serving a total of 3,213 persons.

(C) Through a diversity of vaccination channels and dissemination, a total of 7,125 doses of publicly-funded influenza vaccines and 516 doses of publicly-funded *Streptococcus pneumoniae* vaccines were administered between October and December 2018.

(3) Implemented four-cancer screening and preventive education disseminations

A. Between January and December 2018, a total of 64 sessions of cancer prevention related education and information dissemination activities were held.

B. Between January and December 2018, 11,439 people received cervical cancer screening; 4,647 people received breast cancer screening; 9,618 people received colorectal cancer screening and 1,726 people received oral cancer screening.

(4) Provided eugenic health and preventive care services for children.

(5) Provided various psychiatric health services including medical care, social services, clinical psychological services, occupational therapies and so forth.

(6) Conducted annual conscription physical examination.

(7) Other programs of health authorities.

6. Social Responsibility

(1) In conjunction with national health policies and the needs of community residents, the hospital has continued to collaborate with community leaders in the organization of relevant health promotional activities such as the various health and sanitation seminars, health promotional events and so forth.

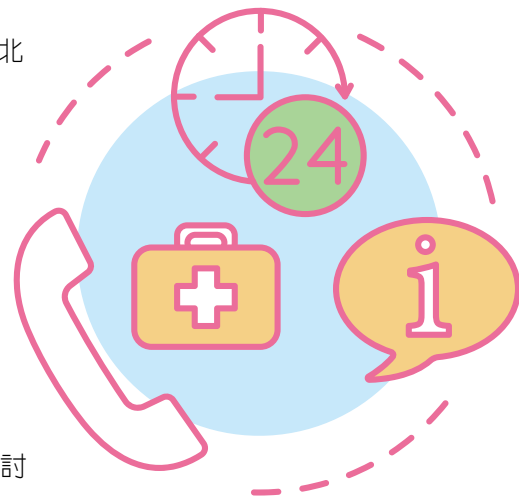
(2) The hospital continued work with community leaders in Wenshan District in the joint promotion of awareness for proper medication in order to help the general public foster the correct concepts and behaviors when taking medication.



- (三) 持續推動社區獨居長輩送餐服務，加強連結社區周邊送餐資源與合作轉介，提供獨居長輩安心營養餐點。
- (四) 提供文山區獨居暨榮民單身宿舍長者身心健康服務，每週協助長輩量測血壓，並媒合不同慈善單位服務與社區領袖共同配合節慶舉辦關懷活動，讓長輩感受溫馨與陪伴。

七、緊急醫療救護

- (一) 醫院鄰近北二高萬芳交流道，且與捷運木柵線共構，位處交通要道，肩負大臺北南區緊急救護的守護神。
- (二) 設有外傷急症外科，全年皆由外傷急症外科主治醫師在院值班，與急診醫師共同負責嚴重外傷病患的救治，及後續會同其他專科醫師（骨科、神經外科、整形外科、重症醫學科等）提供連續性的治療與照護。加護病房部分安排主治醫師 24 小時院內輪值，負責重症病人之照護。
- (三) 為精進急診醫療服務品質，民國 107 年 6 月完成急診空間再次改造，調整急重症動線分流，落實分區醫療，劃分檢傷區、輕重症診療區、兒科診區、急救室、觀察區及負壓隔離室、毒化災空間內化、急診 CT 室、輕症治療室、類流感診療區、精神科保護室、病情討論室等。並加強分區門禁，抑制暴力事件發生，改善急診病人就醫流程並提昇處置效率。
- (四) 設立「24 小時救命專線」0809-009-110，以提供民眾立即性的急救諮詢。
- (五) 配合貓空纜車系統營運，且與捷運木柵線共構，建置緊急醫療救護現場支援醫護人員。
- (六) 萬芳醫院提供新北市東區及東南區、宜蘭縣北區及南區之跨縣市大量傷患緊急醫療救護支援。
- (七) 急救處置能力受外界肯定，肩負多項急救重責，如重度級急救責任醫院、臺北市南區毒化災責任醫院等。
- (八) 急診科醫師長期擔任消防局醫療指導醫師，民國 107 年共有 6 名醫師，定期至新北市消防分隊指導，審核救護紀錄表及案例討論，進而提升救護品質。
- (九) 每年辦理急診大量傷患演習，健全醫院緊急醫療體系運作。





- (3) The hospital also continued to promote meal delivery service to seniors living in solitary at various communities by strengthening the network and referrals for meal delivery in surrounding networks so as to deliver safe and nutritious food to seniors living by themselves.
- (4) Provided physical and mental health services for veterans and seniors living in solitary in Wenshan District by helping them to have their blood pressures taken on a weekly basis. In addition, the hospital has also matched the services from different charity organizations with community leaders in the organization of relevant care events for specific festivals, thereby helping the seniors to feel the warmth of companionship from others.

7. Emergency Disaster Rescue

- (1) Wanfang Hospital is located at a thoroughfare close to Wanfang Interchange on the North Expressway No.2 and the MRT Muzha Line. The Hospital therefore serves as an emergency rescue center in the southern portion of the Greater Taipei Region.
- (2) The hospital operates a trauma center and attending physicians are on duty around the clock at the center all year to work with ER doctors in treating patients with severe trauma and illnesses. Follow-up treatment and care for patients at trauma center are provided by other specialists (i.e. orthopaedic surgeons, neurosurgeons, plastic surgeons, critical care physician and so forth). Attending physicians are on duty around the clock at the ICUs to supervise the care and attend to patients with critical illnesses.
- (3) In an effort to improve ER medical care service quality, the hospital has finished the renovation of its existing ER space in June 2018 to adjust the route of personnel movement for patients with critical illnesses by separating the ER space into specific zones for triage, consultation area for minor/major illnesses, consultation area for children, ER, observation area, negative pressure isolation room, interior space for toxic chemical hazard events, ER CT room, minor ailment treatment room, ILI treatment area, SPR, treatment consultation room and so forth. In addition, the hospital has also enforced stricter access control to prevent potential violent behaviors from patients/visitors while improving the existing process for ER patients to receive medical attention while improving handling efficiency.
- (4) The hospital has setup the “24-hour life saving hotline” (0809-009-110) to provide immediate response to citizens’ request for emergency aid.
- (5) Collaborated with Maokong Gondola System operations and the MRT Muzha Line to deploy on-site medical personnel to provide emergency medical rescue services as required.
- (6) Wanfang Hospitals providing emergency medical service (EMS) coverage for the eastern and southeastern parts of New Taipei City as well as the northern and southern parts of Yilan County.
- (7) The emergency response capabilities of Wanfang Hospital are well-known and much appreciated by the public. The Hospital provides EMS by serving as an first aid responsibility hospital for severe or critical conditions as well as chemical and nuclear accidents for the southern part of Taipei City.
- (8) The hospital's ER doctors have been serving concurrently as EMS physicians at the municipal fire departments. In 2018, a total of 6 ER doctors have been offering their instruction at various fire brigades in New Taipei City on a regular basis by reviewing their emergency rescue charts and discussing specific case studies, thereby improve paramedic service quality.
- (9) Conducted mass-casualty incident (MCI) drills every year to improve the operations of the Hospital's emergency medical care system.



- (十) 長期配合臺北市及新北市消防局，提供醫院實習課程，訓練對象包含中級、高級救護技術員。自民國 105 年 2 月 4 日起，經衛生福利部許可成為高級救護技術員（EMT-P）訓練機構，至 107 年間已訓練 1,611 位救護技術員，更進一步藉由教育訓練提升緊急救護品質。
- (十一) 定期舉辦 ACLS、ETTC、APLS&PALS 等急救訓練課程，提供區域內醫護專業人員參與，且於民國 106 年 1 月正式成為美國心臟協會心血管急救訓練中心，以提供高品質急救訓練。
- (十二) 協助鄰近區域大型活動醫療服務站設置。

八、多語化服務

外籍人士在臺就醫時會因為言語障礙之問題，而影響就醫之安全性及便利性，將外語服務從英語擴大至多語化服務，使醫療機構能提供適切的、安全的醫療服務。

- (一) 服務時段：週一～週六。
- (二) 服務語言：英語、日語、客語、印尼語等語言。
- (三) 製作多語化照顧服務員手冊、衛教單張。
- (四) 多語化志工服務。



九、國際醫療交流

(一) 國際醫療援助

臺北市立萬芳醫院自民國 94 年起展開國際醫療援助工作，將「醫療無國界」的信念化為實際行動，多年來，除派遣人員至各國進行短期醫療服務，也深耕聖多美普林西比醫療援助計畫（斷交因素於 104 年底結束該計畫）、支援史瓦帝尼王國之醫療服務，及配合政府新南向政策於越南、緬甸等國進行結核病防治提升計畫。亦配合政府相關組織單位，辦理外籍醫事人員專業培訓課程。

1. 史瓦帝尼王國（Kingdom of Eswatini）

- (1) 民國 107 年先後派遣婦產科、兒科、外科、內科、泌尿科、神經內科等七名醫師前往支援，協助該國訓練實習醫師，進行指導及考核，以評估實習醫師訓練成效。
- (2) 民國 107 年起承辦「107 年度史瓦帝尼癌症早期診斷及治療計畫」，除派遣優秀醫檢師赴任，並進行 12 名該國醫事人員臨床醫療培訓課程，針對癌症診斷、治療等為期三個月之訓練，期能成為該國癌症診斷及治療之種子教師，提升該國癌症病患照護能力。



- (10) The hospital has also been working with the Fire Departments of Taipei City and New Taipei City by providing relevant internship programs for EMT-1 and EMT-2 trainees. Starting from February 4, 2016, the hospital has been approved by the Ministry of Health and Welfare as a certified training organization for EMT-P and by the end of 2018, the hospital has trained a total of 1,611 EMTs while striving to improve the quality of EMS through education and training.
- (11) In addition to regularly hosting first-aid and emergency rescue courses such as ACLS, ETTC, APLS&PALS and so forth for local medical personnel to participate, the hospital has officially become American Heart Association's Emergency Cardiovascular Care Training Site in January 2017 to provide emergency care training of superior quality.
- (12) Assisted neighboring regions in establishing medical service posts for large events.

8. Multi-Language Services

To ensure foreign people's medical safety and convenience due to language barrier, foreign language services are expanded from English to multi-language services, enabling medical institutions to provide appropriate and safe medical services.

- (1) Service hours: Monday to Saturday.
- (2) Languages offered: English, Japanese, Hakka, Bahasa Indonesia and other languages.
- (3) Caregivers' manual and health education pamphlets are generated in multiple languages.
- (4) Multi-language volunteer services.

9. International Exchanges in Medical Care

(1) International Medical Aid

Wangfang Hospital has provided international medical aid since 2005 to materialize the philosophy of "medical care without borders". In addition to dispatch medical personnel abroad to provide short-term medical services, Wangfang Hospital has supported the medical aid project for the Democratic Republic of Sao Tome and Principe for many years (ended in 2015 due to termination of the diplomatic relation), Apart from supporting medical care service in Kingdom of Eswatini, the hospital has also been involved in collaborative tuberculosis prevention programs with nations such as Vietnam, Myanmar and so forth in conjunction with the government's New Southward Policy. The hospital has also been collaborating with relevant government agencies to host professional training course for foreign medical personnel.

A. Kingdom of Eswatini

- (A) In 2018, the hospital has dispatched 7 physicians in obstetrics and gynecology, pediatrics, surgery, internal medicine, urology, neurology and so forth to said country to assist the training of local interns by offering instruction, evaluation and assessment of training outcome for interns.
- (B) Starting from 2018, the hospital has been responsible for "2018 Early Diagnosis and Treatment Project for Cancer in Eswatini"; apart from dispatching competent medical technicians for the project, the hospital has also conducted clinical medicine training for 12 Swazi medical personnel. The 3-month training program for cancer diagnosis and treatment was designed to help the trainees become the country's seed trainers for cancer diagnosis and treatment, thereby helping Eswatini to boost its capacity to care for domestic cancer patients.



2. 境外醫事人員訓練及交流：

為支持政策，協助衛生福利部「台灣國際醫療衛生人員訓練中心計畫」、國合會「友好國家醫事人員訓練計畫」，接待國際友邦及友好國家醫護人員來台訓練，民國 107 年增加合作對象，與臺灣路竹會協辦「路竹會外籍醫事人員來台訓練計畫」。107 年境外醫事人員訓練及交流成果如表 5。

表 5 民國 107 年境外醫事人員訓練及交流成果

期間	國籍	訓練科別	人次
107/10/22 ~ 12/14	奈及利亞	急診醫學科	1
		婦產科	1
	蘇丹	放射科	1
		消化內科	1
107/07/30 ~ 10/05	史瓦帝尼王國	癌症提升計畫	12
107/10/11 ~ 12/28			

(二) 國際醫療服務推展

1. 新南向政策推動計劃

民國 105 年起，配合國家新南向政策，以其「長期深耕、多元開展、雙向互惠」之核心理念，本院進行各項醫衛合作、人才培育以及拓展行銷之計劃。

- (1) 醫衛計劃合作開發：與靈鷲山佛教基金會合作，107 年起獲得衛生福利部補（捐）助辦理國際衛生事務「緬甸臘戍市醫藥衛生提升－第一年基礎計畫」，以緬甸臘戍市為基地，展開醫療合作計畫。



▲ 緬甸臘戍市醫藥衛生提升－第一年基礎計畫
Medical and Health Improvement in Lashio City, Myanmar - First Year Basic Plan

B. Training of Overseas Medical Personnel and Exchange with Them

To support the policy, Wanfang Hospital assisted the “Taiwan International Healthcare Training Center Project” of the Ministry of Health and Welfare and the “Healthcare Personnel Training Program” of the International Cooperation and Development Fund in receiving healthcare personnel from friendly nations to receive training in Taiwan. In 2018, the hospital has been working with additional partners and has jointly organized the “Training Program of Foreign Medical Personnel in Taiwan” by Taiwan Root Medical Peace Corps. The summary and outcome of training of exchanges with foreign medical personnel are shown in table 5.

Table 5 Outcome of training/exchanges with foreign medical personnel in 2018

Duration	Nationality	Department	Number of personnel
2018/10/22 ~ 12/14	Nigeria	Emergency Medicine	1
		Obstetrics and Gynecology	1
	Sudan	Radiology	1
		Gastroenterology	1
2018/07/30 ~ 10/05	Kingdom of Eswatini	Cancer Improvement Plan	12
2018/10/11 ~ 12/28			

(2) Promoting International Medical Services

A. New Southward Policy Promotion Plan

To support the New Southward Policy of the government with the core philosophy of “Long-Term Operation, Diversified Development, Mutual Benefit”, the hospital has executed various medical and health cooperation, talent training, and marketing exploration projects since 2016.

(A) Medical and health projects and joint

development: Since 2018, by collaborating with Ling Jiou Mountain Buddhist Society, Wangfang Hospital plans has received the subsidy (sponsorship) from the Ministry of Health and Welfare in the promotion of international sanitation with the “Healthcare and sanitation improvement in Lashio city, Myanmar - Fundamental Plan for 1st Year” with Lashio city as the base site for relevant healthcare collaborations.





- (2) 承辦疾病管制署「107年新南向臺越結核病防治交流合作計畫」：邀請廣寧省衛生廳副廳長帶領之26位結核病防疫相關人員來臺參加「2018新南向結核病防治國際研習營」，並於下半年派遣臺灣防疫專家出訪廣寧，就公衛、臨床、檢驗，轉殖三面向進行交流，並與越南廣寧省肺結核暨胸腔病院簽署合作意向書及於萬芳醫院設立合作計畫辦公室。為臺越防疫技術轉殖合作奠定良好基礎，未來將針對「公衛個案管理」、「抗藥個案臨床診療」、「結核病檢驗」三大防疫主軸擬定合作策略，拓展雙方防疫量能，提升越南結核病防治成效，在新南向旗艦計畫豎立一重大里程碑，深化臺灣在東南亞國家之醫療影響力。
- (3) 合作協議：配合國家政策，期進行軟實力及人與人之連結，建立海內外機構之合作機制，臺北市立萬芳醫院與越南廣寧省衛生局、越南白梅醫院、緬甸Aung Hospital簽訂合作意向書，將進行人才培育。

2. 國際事務推展

續與衛生福利部簽署「醫療服務國際化推動計畫」合約，致力推動國際醫療事務並配合參與國內、外標竿學習等相關活動及會議。

3. 境外參訪交流

積極推動國際醫療服務發展，增進與世界各地接軌，接受來自世界各國參訪申請，107年度接待中國大陸、日本、韓國、印尼、印度、緬甸、帛琉、比利時等國之官員、醫療專業人士等，共計64團至萬芳醫院交流。

(B) Involvement in the Centers for Disease Control's "Taiwan-Vietnam Collaborative Tuberculosis Prevention Program in the New Southward Policy for 2018": The hospital invited the delegation of 26 TB prevention personnel led by the Deputy Director of Quang Ninh Province's Department of Health to visit Taiwan and attend the "2018 New Southward Tuberculosis Prevention International Workshop" and later in the second half of the year, the Center dispatched disease prevention specialists to visit Quang Ninh Province and engage in exchanges pertaining to aspects of public health, clinical care, medical testing and transfection. On top of that, the Center has also entered into a letter of intent with the Quang Ninh TB & Chest Hospital, with the collaborative program office to be established in Wanfang Hospital. In an effort to establish a sound foundation for Taiwan-Vietnam Disease Prevention and Transfection Collaboration, the hospital will formulate specific strategies for collaboration based on the three pillars of disease prevention: "public health case management", "clinical treatment for cases of drug resistance" and "TB examination" in order to strengthen the disease prevention energies for both parties and improve the effectiveness of TB prevention in Vietnam. This will in turn set a critical milestone in Taiwan's New Southward Flagship Project and consolidate the medical influence of Taiwan in southeast Asian nations.

(C) Cooperation agreement: Wangfang Hospital supports the policy. It not only shows the softpower, but also builds a connection among people and establishes a cooperation mechanism for domestic and overseas institutions. Taipei Municipal Wangfang Hospital entered into a letter of intent with the health bureau of Quang Ninh Province and the Bach Mai Hospital in Vietnam, Myanmar's Aung Hospital entering into letter of intent for talent cultivation.

B. Promotion of International Affairs

Continues to sign the "Medical Service Internationalization Promotion Project" contract with the Ministry of Health and Welfare and dedicates itself in promoting international medical affairs and cooperates in participating in domestic and international benchmarking events and conferences.

C. Overseas Visit and Exchange

Wangfang Hospital promotes international medical service, facilitates the connection to the world, and accepts the application for visit from all over the world. In 2018, the hospital has received government officials and medical personnel and specialists from China, Japan, Korea, Indonesia, India, Myanmar, Palau and Belgium, with a total of 64 delegations visiting Wanfang Hospital for exchange.



▲ 結核病防治交流合作計畫簽署合作意向書

Tuberculosis Prevention and Control Exchange Cooperation Plan Signed a Letter of Intent for Cooperation



第三節 臺北市立關渡醫院

臺北市立關渡醫院創立於民國 89 年，由臺北市政府興建委託臺北榮民總醫院經營，以發展社區醫療、慢性診療及長期照顧為主。

目前設置有急性一般病床 45 床、慢性一般病床 67 床、呼吸器依賴病床 32 床、加護病房 3 床、安寧病床 10 床、洗腎病床 19 床、急診觀察床 3 床，另附設精神科日間留院病房 50 床和附設護理之家 92 床，總計 321 床。

提供醫療、保健、預防醫學等多層面醫療服務，包括急診及加護中心、血液透析治療中心、復健治療中心、呼吸治療中心、兒童早期療育中心、老人身心醫學、中老年日間照護中心、護理之家、居家護理、健檢及臨床檢驗中心、轉診及轉檢、長期追蹤等相關服務。獲臺北榮民總醫院醫學中心的支援與合作，透過垂直整合、轉診、轉代檢及後送機制，讓社區居民獲得可近性、持續性、整體性、整合性、有效率之高品質醫療服務，且符合中央健康保險署分級醫療資源共享、節省醫療成本的政策。

一、建構完善長照 2.0 社區整合照顧

（一）落實出院準備銜接長照 2.0，榮獲衛福部出院準備服務友善醫院認證

關渡醫院於民國 100 年即設立出院準備服務委員會，106 年 9 月為有效整合醫院各部門資源，提供符合長期照護者需要的安康、安全、安心、有尊嚴、可近性之友善醫療環境，特修訂為「出院準備服務銜接長期照護發展委員會」，並配合辦理「衛生福利部－出院準備銜接長照 2.0 計畫」及「臺北市出院準備銜接長照 2.0 友善醫院獎勵計畫」。



民國 107 年出院準備服務總收案數共 622 人次，出院居家照護指導其中鼻胃管照護指導 379 人次、導尿管照護指導 208 人次、氣切管照護指導 30 人次、傷口照護 29 人次及胰島素注射 5 人次；提供個別護理指導及護理指導單張共 763 人次；院內跨專業團隊會診，其中營養師 390 人次、社工 63 人次、復健 220 人次、居家護理 90 人次；轉介人次 640 人，轉介成功 592 人次轉介成功率 92.5%，不接受轉介 48 人次；出院後電話追蹤訪談 596 人次，電訪滿意度達 100%。

執行出院個案具長照 2.0 服務需求者共 313 人，其中符合轉介長期照護資格及個案或家屬同意轉介者共 84 人，每月平均轉介率 26.8%，達成目標值（ $\geq 15\%$ ）。



Section 3 Taipei Municipal Gan-Dau Hospital

Taipei Municipal Gan-Dau Hospital was founded in 2000. It was built by Taipei City Government and operated by Taipei Veterans General Hospital. Its main focus is developing community medical service, treating chronic diseases and long-term care.

Gan-Dau Hospital currently has a total of 321 hospital beds, of which 45 hospital beds were for acute patients, 67 chronic care, 32 hospital beds for chronic respiratory care, 3 hospital beds for intensive care, 10 hospital beds for palliative care, 19 hospital beds for hemodialysis, 3 hospital beds for emergency observations, 50 hospital beds for psychiatric day care and 92 hospital beds in the affiliated nursing home.

Gan-Dau Hospital provides multi-layer medical services from medical care, healthcare, to preventive medicine, including emergency and ICU center, hemodialysis treatment center, rehabilitation treatment center, respiratory treatment center, children early intervention center, physical and mental medical service for seniors, day care center for middle-aged and elderly people, nursing home, household caring, health examination and clinical testing center, referral and transition, long-term tracking and other related services. With the support and cooperation from the medical center of Taipei Veterans General Hospital, through vertical integration, referral, examination assisting and post-delivery mechanisms, it provides community residents with accessible, consistent, comprehensive, integrated and effective high quality medical services that meet the National Health Insurance Administration's policy of resource sharing for classification of medical treatment and saving on medical costs.

1. Long-Term Care 2.0 and Community Integrated Care

(1) The hospital was certified by MOHW as a Discharge Planning Service Friendly Hospital for its effort in Long-Term Care 2.0

Gan-Dau Hospital established a discharge planning committee in as early as 2011. To effectively integrate the resources of individual departments of the hospital and provide a sound, safe, comfortable, dignifying, accessible, and friendly healthcare environment, Gan-Dau Hospital renamed the committee to "Discharge Planning for Long-Term Care Development Committee" in September 2017, and executed the "MOHW - The Scheme of Discharge Planning for Long-Term Care 2.0" and the "Discharge Planning for Long-Term Care 2.0 in Taipei City as a Friendly Hospital Incentive Program".

A total of 622 cases of discharge service were accepted in 2018. Among the home care cases for which instruction was needed, 379 were nasogastric tube care cases, 208 were urinary catheter care cases, 30 were tracheostomy tube care cases, 29 were wound care cases, and 5 were insulin injection cases. There were 763 cases for which special nursing instruction and nursing instruction leaflet are provided; 390 nutritionists, 63 social workers, 220 rehabilitation therapists, 90 home nursing staffs were participated in the internal cross-department consultation; 592 of the 640 referrals were referred successfully with a success rate of 92.5%, and 48 cases refused the referral; follow-up actions were taken after the discharge and 596 cases were interviewed. All of them (100%) were satisfied with the phone interview.

313 cases leaving the hospital needed Long-Term Care 2.0 service, and 84 of them were qualified for long-term care or referred with their agreement or upon consent of their family members. The monthly referral rate was 26.8% and reached the target value ($\geq 15\%$).



（二）成立長照A單位社區整體照顧中心

關渡醫院於民國 107 年承辦臺北市政府社會局北投區社區整合照顧計畫（A 級單位），建立北投區關渡、叭哩岸社區整體照顧模式，串聯 B、C 級單位，整合北投區長照資源，讓各項服務發揮最大效益，以創造彈性多元化的服務，縮短長照服務對象與家屬的等待時間及家庭照顧需求，增加社區內服務人數。

自承辦計畫以來，派任專責個案管理師 3 名，承接長期照顧管理中心個案轉介，並針對個案需求，聯繫協調 B 級或 C 級單位提供服務，並透過每月一次定期工作聯繫會議，廣邀區域內長照資源單位共同與會，研討北投區長照服務串聯議題，及發展社區內協力聯盟策略，使區域內長照資源活化、減少橫向聯繫時間、縮短服務使用者尋求服務時間及增加可近性；107 年連結 2 個 A 級單位，33 個 B 級單位、4 個 C 級單位，落實發展居家整合照顧體系與服務模式。107 年共計服務 339 位個案，訪視 410 人次，媒合成功 3,849 人次長照服務。



▲ 北投社區整體照顧服務中心
Beitou District Community Integrated Care Service Center

（三）開辦社區整合照顧服務北投區石頭湯據點

關渡醫院發揮社區醫療之責任，規劃急、慢性照護垂直整合及建構長期照護體系網絡，與臺北榮民總醫院急重症建構為整合性健康照護體系。積極配合衛福部、衛生局、社會局各項政策、任務及推動長照計畫，配合臺北市政府社會局推出「社區整合照顧服務（石頭湯計畫）」，於民國 107 年 4 月 30 日成立石頭湯據點，將長照深入社區，也讓醫療服務更友善，除了依個案需求連結服務資源外，更讓個案管理員，密切追蹤失能者在黃金復健期，依其需要不斷調整長照服務，讓失能者即早恢復體能，靈活運用長照服務各項內容：居家服務、日間照顧、居家醫療、居家護理、居家復健、居家營養、居家藥師等多項專業人員等資源，也將長照宣導帶入社區中，成為社區鄰里間即時的長照諮詢站。



▲ 北投長照石頭湯開幕
Beitou Long-Term Care Stone Soup Grand Opening



(2) Establishment of Long-Term Care Class A Unit Community Integrated Care Service Center

In 2018, Gan-Dau Hospital was commissioned by the Department of Social Welfare to act as the primary unit (Class A unit) in the Integrated Care Project for Beitou District Communities in the construction of a model of integrated care for residents of Guandu and Qilian Communities in Beitou District by connecting with relevant Class B and C (i.e. secondary and tertiary) units to integrate relevant long-term care resources in Beitou District in order to optimize the effectiveness of various services. Our goal is to create versatile and diversified services to shorten the waiting time for care recipients and their families and accommodate their demands for home care while serving more residents within the community.

Since the commission, the hospital has appointed three designated case managers to be responsible for the referral of cases from the long-term care management center by contacting and coordinating with relevant Class B/C unit to provide specific services in accordance with the needs of each case. Through the monthly work contact meeting, the hospital has been inviting other long-term care resource units within the area to participate in the meeting to discuss issues of linking relevant long-term care services in Beitou District and the development of strategies for supporting alliance within the communities so as to vitalize existing long-term care resources while reducing the time for horizontal liaison. This will help to shorten the time spent by users in search of services and make relevant services more accessible. In 2018, the hospital has connected 2 Class A units, 33 Class B units and 4 Class C units to promote the development of a home integrated care system and service model. In 2018, the hospital has served a total of 339 cases, made 410 visits and successfully matched 3,849 citizens to relevant long-term care services.

(3) Establishment of the Community Integrated Care Service - Stone Soup Station in Beitou Service District

Fulfilling its responsibility as the provider of healthcare services in the local community, Gan-Dau Hospital has planned the vertical integration of acute and chronic care and constructed a long-term care system network by collaborating with Taipei Veterans General Hospital's trauma center to form an integrated healthcare system. Apart from actively collaborating with relevant policies, missions and long-term care promotion by the Ministry of Health and Welfare, the Department of Health and Department of Social Welfare, the hospital has also operated in conjunction with The Department of Welfare, Taipei City Government to launch the "Community Integrated Care Service (Stone Soup Project)" by establishing the Stone Soup Service Station on April 30, 2018 as a way to not only deliver long-term care deeper into the communities but also make medical services friendlier. Apart from connecting different cases to the services/resources they need, the Station also enables case managers to keep track of disabled people to engage in rehabilitation during the prime period and continually adjust the long-term care service according to their needs. This will help the disabled people to regain their health and make versatile use of various long-term care services, such as home service, day care, home medical care, home nursing, home rehabilitation, home nutrition, home pharmacist with relevant personnel and resources. The Stone Soup Service Station also serves as a vehicle that brings long-term care dissemination to the communities by functioning as the information booth for long-term care that provides timely response.



臺北市立關渡醫院自加入整合照顧服務石頭湯團隊後，不僅能為失能長者提供專業醫療的後盾，更有社區在地服務資源，也正好如同石頭湯計畫原本精神，成就一鍋香醇濃郁的美味湯品，與地方鄰里體系緊密結合，成為社區鄰里長最強的資源後盾。針對有長照需求服務個案或家屬、家庭照顧者、社區民衆辦理豐富多元健康促進及家庭照顧者支持活動或講座包含：均衡營養、下肢肌力訓練、社區復健、創意手作、生活藝術、居家安全、口琴音樂饗宴、說唱日本語等紓壓之服務等。4 月到 12 月辦理課程 284 場次，共計 2,512 人次參加。提供長照服務介紹、問題需求或轉介等，諮詢服務共計 623 人次，服務對象以社區民衆居多占 91.6%，諮詢方式以至石頭湯現場諮詢為主占 95.7%，諮詢內容以詢問長照服務項目為主占 75%，其他是詢問石頭湯辦理哪些課程以及課程內容說明 22.4%。另外，連結社區相關資源至北投區公所、北投老人服中心、關渡關懷站、耆福老人服務中心、豐年社區、北投養心站據點、一德里活動中心等，進行長期照顧相關宣導議題，4-12 月共宣導 23 場次 1,679 人次參與。

（四）走動式發掘社區內潛在長照需求之失能個案

透過社區主動發掘北投地區的新長期照顧服務需求之失能個案，或是透過住院出院準備服務、門診評估有長照需求之個案，轉介至長期照顧管理中心，提供後續長照服務。4-12 月長照需求服務轉介共 132 人，其中包含：延緩失能復健 40 人，成功轉介 55 人，轉介不成功 37 人，個案來源以社區轉介為主占 89.3%，由病房出院準備服務轉介占 7.5%。分析長照需求成功轉介 55 人之服務項目共計 123 人次，其中以輔具購買及住宅無障礙環境改善居多占 26.9%，其次是照顧服務 20.4%。不成功轉介原因以長照舊個案最多 45.9%。

提供加值個案服務，定期每月一次召開跨單位跨專業團隊個案研討會議，討論個案加值服務計畫執行情形或困難。4-12 月加值個案服務共計 43 名，女性占 67.5%，75-84 歲占 34.8%，一般戶占 90.6%，CMS 失能等級 8 占居多 25.6%，開案原因以個案生活自理能力可能提升者占居多 54%，指標改善項目以第 2 項：接受兩項以上長照服務和第 9 項：照顧者負荷下降占居多分別為 27.5%。





After joining the Integrated Care Service's Stone Soup team, Taipei Municipal Gandau Hospital not only is able to function as a reliable support for professional healthcare for disabled seniors, but also gain access to resources of local community services; true to the spirit of the stone soup project, the combined efforts and resources from everyone are the key ingredients to preparing a pot of delicious broth. By working closely with local communities, systems and residents, the hospital will become the most dependable partner for borough chiefs and community leaders in the area of long-term care. For seniors and their families with need for long-term care, caregivers and enthusiastic community residents have organized a variety of health promotion and caregiver support events/seminars including: balanced nutrition, lower limb strength training, community rehabilitation, creative handicraft, life art, home safety, harmonica performance, sing-along in Japanese and other services that relief stress. Between April and December, a total of 284 sessions were held for a 2,512 participants. The Station provides long-term service introduction, responds to inquiries and offers referrals. Thus far, the Station has served 623 residents, with 91.6% of them being community residents. Most of the inquiries were made in person at the station (95.7%); and the majority of inquiries were about the services available for long-term care (75%), while other inquiries made fell in the category of courses and course contents available from the Stone Soup Project (22.4%) In addition, the Station has also helped to connect relevant community resources to agencies/organizations including Beitou District Office, Beitou Senior Service Center, Guandu Care Station, Qifu Senior Service Center, Fengnian Community, Beitou Yangxin Station, Community Center of Yide Borough and so forth for the dissemination of topics relating to long-term care. Between April and December, a total of 23 sessions were held for 1,679 participants.

(4) Discovery by walking around to identify potential case of disabled senior in need of long-term care within the community

New cases of disabled seniors discovered by community members who have taken the initiative to go about in Beitou District and other cases that have gone through the discharge planning service/deemed in need of long-term care during outpatient evaluation will be referred to the long-term care management center for subsequent long-term care services to be provided. Between April and December, the Station referred 132 citizens in need of long-term care service. Among them, 40 were on rehabilitation to delay disability, 55 were successfully referred and the remaining 37 were unsuccessful in their referral. Most of the cases came from community referrals (89.3%), while 7.5% came from discharge planning services. For the 55 citizens that were successfully referred to respective long-term care services, they received 123 services in total, with the majority (26.9%) being purchase of assistive tools and accessible environment improvement in their homes, followed by care services (20.4%). Most of the unsuccessful referrals had been old cases for long-term care (at 45.9%).

The Station also provides value-added service for specific cases, with monthly inter-unit meeting for professional teams organized to discuss the status of value-added service implementation or difficulties that have been encountered. There had been a total of 43 citizens that have received value-added service between April and December. Among them, 67.5% are female and 34.8% of them fell in the 75-84 year-old age group. Most of them come from normal households at 90.6%; and the majority (25.6%) were at a CMS disability index of 8. 54% of these cases were chosen because they were perceived to have the potential to improve their capacity to take care of themselves with the proper aid. In terms of improvement indicators, the 2nd: receiving two or more types of long-term care services and 9th: reducing the burden on caregiver turned out to be the majority at 27.5%.



（五）提升社區老人關懷據點質與量

臺北市立關渡醫院秉持「視病猶親，融入社區」的理念，發揮社區醫療之責任，實踐『在地老化、健康老化、活躍老化』之理想，於民國 95 年在臺北市立關渡國民中學成立「關渡老人關懷站」，開創社政、衛政與教育單位合作夥伴關係之先鋒，也是全國第一家以醫療機構為後盾的「老人關懷據點」。關懷據點是社區長者溝通之平臺，積極與公私部



▲ 長照社區觀摩據點關渡關懷站
Long-Term Care Community Observation Point
Guandu Care Station

門、社會團體以及學校拓展與開創共同的合作夥伴關係。為提升據點的質與量，107 年關渡醫院的醫師、護理師、營養師、藥師及 PGY 社區醫師，北投運動中心運動教練、國立台灣師範大學體育系及健康促進與衛生教育所、國立陽明大學、臺北城市科技大學、馬偕醫護管理專科學校、關渡里辦公室、社區發展協會、義消大隊、社區排舞團體等，和北投區健康服務中心共同合作等，以健康促進為主軸，辦理子孫打擊樂、二胡班、3C 資訊班、香療班、園藝班、陶藝班等，並協助關渡國中整修源陶藝教室，提供更豐富及多元化學習資源，促使中高齡者提早成功適應老化，建構一個高齡友善的學習環境，提升長者生活品質，落實在地安養和在地老化以及活躍老化、成功老化之終極目標。

民國 107 年課程包含銀髮族睡眠障礙問題、認識防災與緊急救護、培養正向思考的生活態度、追求人生享 健康、樂齡創意之美、智慧型手機與社群生活、銀髮族旅遊學習、消費保護與防詐騙、交通安全宣導等共計 65 場次，參與人數約 5,456 人次。

再者，關渡關懷站的長者在關渡醫院帶領下，參加國民健康署 107 年阿公阿嬤活力秀競賽榮獲四冠王，北投區魅力獎、臺北市最佳活力獎、全國北區金牌獎、全國總決賽金牌獎。



(5) Improvement of the Quality and Quantity of the Community Senior Care Points

With the “seeing patients as the family members and integrating into the community” in mind, Gan-Dau Hospital takes the responsibility for community health care to materialize the ideals of “aging in place, healthy aging, and active aging”. It set up the “Gan-Dau Senior Care Point” in Taipei Municipal Gan-Dau Junior High School in 2006 and acted as a pioneer in the establishment of the partnership with health care and welfare services as well as education unit. The Gan-Dau Senior

Care Point is the first care point supported by a hospital in Taiwan. The care point provides a communication platform for the elderly. Gan-Dau Hospital actively expands and creates cooperation partnership with public and private sectors, social organizations, and schools. To increase the quantity and quality of the care points, the doctors, register nurses, nutritionists, pharmacists, PGY community physicians of the Gan-Dau Hospital as well as the coaches of the Taipei City Beitou Sports Center, the Department of Physical Education and Institute of Health Promotion and Health Education of the National Taiwan Normal University, National Yangming University, Taipei City University of Science & Technology, Mackay Junior College of Medicine, Nursing and Management, Gan-Dau Li Office, Community Development Association, volunteer fire company, community dancing group, and Beitou District Health Center, Taipei City, worked together in 2018 to provide training classes including parent-child percussion, erhu instrument, 3C (Computer, Communications, and Consumer Electronic Product) and IT, aromatherapy, horticulture and ceramic art, and assist Gan-Dau Junior High School in the renovation of the ceramic art classroom, provide it with more abundant and diversified learning resources. This is helpful for the middle-aged and elderly people to adapt themselves to the aging as early as possible. A senior friendly learning environment was built to improve the quality of life of the elderly and achieve the extreme goals of local retired life, aging in place, active aging, and successful aging.

The courses of 2018 included the issues of sleep disorder among elderly people, preparation against natural calamities and emergency care, cultivation of a positive attitude toward life, pursuit of life and enjoyment of longevity and health, the beauty of the senior’s creativity, smart phone and social life, a happy trip, consumer protection and precautions against fraud, and 65 sessions of traffic safety dissemination activities. About 5,456 senior citizens participated in these courses.

Not only that, under the guidance of Gan-Dau Hospital, the elderly at Guandu Care Point took part in the 2018 Grandpa & Grandma Vitality Show organized by the Health Promotion Administration to win 4 titles: Best Charisma for Beitou District, Best Vitality in Taipei City, Gold Medal for Northern Taiwan and Gold Medal in the National Finals.



▲ 帶領關懷站長者參加阿公阿嬤活力秀榮獲四冠王
Guiding Elders to Participate in Grandparents Vitality Show won Quadruple Crown



（六）成立社區復健站

我國進入高齡化社會時間雖晚，但人口老化速度卻異常快速，配合衛生福利部長照 2.0 政策之推動，於北投區成立 5 個據點（包括關渡關懷站、伊甸、老吾老、榮光及北投區健康服務中心）之社區復健站服務，針對社區中長照 2.0 個案，經照顧管理中心核准為使用長期照顧相關服務給付對象後，由駐點之職能治療師或物理治療師提供服務，就近接受運動、日常生活功能訓練與復健指導服務，強化社會參與，促進身心健康，以預防及延緩失能（智），達到建立長期照顧資源規劃整合與管理機制，發展以民衆需求為導向之多元化社區照顧服務模式，並辦理提供服務單位評鑑及考核，提升照顧服務品質的目的。

急性醫療後復健，應把握「復健的黃金治療期」，此時恢復最快及效果最好，通常建議病人在醫院復健治療，可藉由復健儀器促進身體各部功能的恢復，減少失能狀況發生。黃金期過後功能的恢復逐漸停止，復健進步的空間十分有限，此時復健之目的係維持現有的功能。進入慢性期後，病人回歸家庭生活，上下樓梯、上下床、洗澡、如廁、吃飯、溝通等問題需要獲得更好之處置，以維持基本生活品質。另衰弱及失能（失智）已有期刊發表有效之教案模組訓練，以達到預防及延緩失能之效果，包括復健治療、日常生活功能評估和訓練，以及適合的輔具建議，達到社區長照預防的政策目標。

（七）推動預防及延緩失能（失智）計畫

預防失能是長期照顧重要的議題，臺北市立關渡醫院採用衛生福利部實證預防失能復健運動模式，治療師針對每位長者做功能性評估，並指導長者做機能回復訓練，提升下肢肌肉力量減少跌倒發生率。

辦理失智症防治宣導活動，協助老人家預防失智症及家屬如何照護失智症病人；並積極辦理失智症衛教講座及成立「失智症家屬支持團體」，提供失智症相關衛教及照護。

參與財團法人臺北市北投文化基金會於北投區創立之「哇哈哈失智互助家庭計畫」，提供社區醫療群失智個案轉介、專業諮詢，並由社區醫學科醫師參與互助家庭學習及實務運作。





(6) Establishment of Community Rehabilitation Stations

Though Taiwan becomes an aging society in the later period of time, the aging speed is unusually very fast, to implement the Long-Term Care 2.0 of the Ministry of Health and Welfare, 5 points in Beitou District (including Guandu Care Point, Eden, Laowulao, Rongguang, and Beitou Health Center) are set up to provide community rehabilitation station service. When a patient of Long-Term Care 2.0 is approved by the long-term care management center as a case to receive the long-term care service, the stationed occupational or physical therapist will offer their help so that the patient can receive exercise, daily life function, and rehabilitation teaching service to enhance his/her social participation and improve his/her physical and mental health to prevent and postpone the disability (dementia). This is helpful in the establishment of a mechanism for planning, integration and management of long-term care resources and development of a versatile community care service mode with the requirements of the public as the core to provide a basis for the service unit to make assessment and evaluation, and improve the care service quality.

As for the rehabilitation after an acute treatment, the function recovers most quickly with the highest effectiveness by seizing “the prime period of rehabilitation”. It is usually suggested that the patient stay in the hospital for rehabilitation to facilitate recovery of the body functions using the rehabilitation devices and minimize the occurrence of disability. The recovery of function declines gradually after the prime period and the improvement of the rehabilitation becomes limited. The purpose of rehabilitation from this point onward is to maintain existing function. After entering the chronic phase, the patient returns to normal family life including going up and downstairs; getting into and out of bed; taking a bath; using the toilet; eating and communicating. These must be addressed more adequately to maintain basic quality of life. There are already supporting evidence in relevant journals to support the teaching project training in the form of modules for the population of frailty and disability (dementia) to prevent and postpone disability, including rehabilitation therapy, assessment and training of daily life functions, and suggestions of suitable assistive devices, to achieve the policy goal of prevention through long-term care.

(7) Disability (Dementia) Prevention and Postponement Project

Prevention of disability is an important issue of the long-term care. Taipei Municipal Gan-Dau Hospital adopts evidence-based rehabilitation exercise mode for prevention of disability provided by the Ministry of Health and Welfare. Therapists assess the function of individual seniors and teach them how to engage in function recovery training to improve their muscular strength and minimize the occurrence of tumbling.

The hospital has also been organizing dementia prevention disseminations to help seniors protect themselves against dementia and teach citizens with family members suffering from dementia on how to take care of them. In addition, the hospital is also actively hosting health seminars on dementia and establishing the “dementia family member support group” by providing relevant education and care for them.

Gan-Dau Hospital has been participating in the “Wow Haha Dementia Mutual Help Family” project of by Peitou Culture Foundation to provide dementia referral and professional consultation services for community health group. Gan-Dau Hospital also dispatches doctors in the community medicine division to participate in the learning and practical operation of the mutual help family project.

(八) 推動長照住民「日間－芳香療法」、「夜間－精油霧化器」芳香保健

臺北市立關渡醫院附設護理之家長者年齡偏高，身體功能與記憶力逐漸退化，在腸道方面，腸蠕動變慢、肌肉收縮力下降、腸肌神經叢減少，導致對糞便刺激反應下降，因而便秘，機構半數以上住民有使用軟便藥情況。另外住民因老化因素，在睡眠方面，非快速動眼期第 3、4 階段時間縮短，半夜甦醒的次數較多、易淺眠，睡眠品質下降，情緒及肌肉無法達到放鬆，因此藉由「日間－芳香療法」、「夜間－精油霧化器」芳香保健活動，達到以下目的：



1. 教授精油的知識與香氣的刺激，活化長者智能。
2. 配合精油按摩達到肌肉與情緒放鬆，改善睡眠品質與排便問題。
3. 鼓勵住民、家屬、外籍照顧者、護理師參與並充分釋放壓力，得到身體、心理的愉悅、放鬆。
4. 外籍照顧者學會按摩放鬆技巧，協助住民平日的肌肉放鬆、達到舒壓的生活。

為期 12 週芳香保健活動，住民、家屬及外籍看護工參與踴躍、互動頻繁，活動過程發現家屬與外籍看護工討論熱烈，並利用匹茲堡睡眠品質量表進行前後測，發現芳香保健對家屬及外籍看護工效果較明顯，家屬及外籍看護工之匹茲堡睡眠品質量表總分由 8.71 分下降至 6.96 分；住民之匹茲堡睡眠品質量表總分由 11.5 分下降至 8.71 分，達成率：112%，進步率：24.3%。照顧者參加芳療活動後連續睡眠時間由 4 小時進步到 7 小時，進步率 75%。住民夜間霧化器使用後連續睡眠由 3 小時進步到 6 小時，進步率 100%。因此，芳香保健活動對家屬與外籍看護工各項生理、心理、社交，都具顯著意義。參與活動能讓機構住民、家屬、外籍看護工豐富社交生活，增加與外界資訊與事物接觸；住民、家屬、外籍看護工 DIY 製作自身保健小物時，表情愉悅且交流增加，芳香精油運用於室內環境，讓人心情愉悅，住民、家屬及外籍看護工自我感受皆有進步。

(九) 居家照護到宅服務 24 小時專線諮詢

配合國家政策於民國 99 年起即提供「申請外籍看護工」到宅評估服務，並參與臺北市政府衛生局長期照護大溫暖計畫「居家護理專業人員訪視服務計畫」。民國 104 年 9 月新增乙類社區安寧照護，以利末期病人於社區中獲得安寧療護之照護。首創 24 小時電話諮詢服務專線，隨時有居家護理師提供相關緊急醫療諮詢；並實施居家護理品質指標監測，定期與安養護機構負責人、護理師及工作人員檢討各項業務推動及召開個案討論會，提供安養護機構人員在職教育訓練及住民、家屬之護理指導，協助安養護機構防疫設施之改善。已連續 4 年獲臺北市政府衛生局居家護理機構督考訪查評鑑為「優等」機構。



(8) Promotion of “Daytime - aromatherapy” and “Nighttime- aroma diffuser” for long-term care recipients

The age of elderly in the affiliated nursing home of the Taipei Municipal Gan-Dau Hospital is high. In addition to degenerating gradually in physical function and faculty of memory, they suffer from slow peristalsis of intestines, decline of muscle contraction force, and reduction of myenteric plexuses in the enteric canal. This may affect the response to fecal stimulation and lead to constipation. More than half of the residents in the nursing home use stool softener. As for the sleep, the time of NREM at the 3rd and 4th phases is shortened due to aging of the resident. They wake up more times and sleep lightly more often. The quality of sleep is bad and, thus, the sentiment and muscle are not really relaxed. Hence, the introduction of “Daytime - aromatherapy” and “Nighttime- aroma diffuser” technique can achieve the following goals:

- A. Impart knowledge of essential oil and activate the intellect of the elderly through aromatic stimulation.
- B. Relax muscle and sentiment by massaging with essential oil to improve the quality of sleep and bowel movement.
- C. Participation of the resident, family member, foreign caregiver and register nurse to help them adequately relief stress and become joyful and relaxed both physically and mentally.
- D. Foreign caregivers learn massage and relaxing skills, and help the residents relax their muscle everyday to live a life without stress.

The 12-week event of aromatherapy care attracted enthusiastic participation from residents, their family members and foreign caregivers, with much exchange and interaction. The hospital found family members and their foreign caregivers have engaged in enthusiastic discussion on the effectiveness of the therapy and applied the Pittsburgh sleep quality index (PSQI) for a pre/post-therapy measurement. The results shown that aromatherapy to have more significant effect on family members and foreign caregivers, with their PSQI score dropping from 8.71 to 6.96; for residents, their PSQI score fell from 11.5 to 8.71. The overall achievement rate came to 112%, with an improvement rate of 24.3%. After participating in the aromatherapy treatment, their uninterrupted sleep time increased from 4 hours to 7 hours, with an improvement rate of 75%. With the use of nighttime aroma diffuser, residents have reported an improvement in their uninterrupted sleep time from 3 hours to 6 hours, equivalent to an 100% improvement rate. These results showed that aromatherapy to offer significant benefits in their physiological, mental and social health for family members and foreign caregivers. Participation in events held by the institution can enrich the social life of the residents, family members and foreign caregivers and give them more opportunities to contact external information and environment. When making healthcare trinkets during the DIY time, the residents, family members and foreign caregivers looked joyful and exchanged more with one another. Essential oil was applied in the indoor spaces and the fresh fragrance kept people in a good mood and the self-perception of all residents, family members and foreign caregivers was improved.

(9) At-home Household Care Service 24-Hour Hotline Consultation

Starting from 2010, Gan-Dau Hospital has coordinated with the “Foreign Caregiver Application” at-home evaluation policy of the government and participated in the Department of Health, Taipei City Government Long-Term Care Warming Project of “Household Caregiver Vesting Service Project”. B-type Community Palliative Care was introduced in September 2015 so that terminal patients can easily receive palliative medical care within their communities. The 24-hour telephone consultation service hotline was first established, so that there will be household caregiver at any time to provide related emergency medical consultations. The household care quality indicator monitoring was also implemented in which the promotion of various operations and cases discussion meetings are held regularly with nursing institution owners, register nurses and staff, provide on job education and training to nursing institution personnel, provide nursing instructions to family members, and assist nursing institutions in improving their epidemic preventing faculties. For 4 consecutive years, it has been categorized as the “Outstanding” household care institution by the Department.



(十) 成為國內外長照社區據點觀摩機構

臺北市立關渡醫院用心經營社區長照服務，並榮獲各界肯定已成為國內外之觀摩機構，民國 107 年接受台灣健康促進暨衛生教育學會、知行教會、基督教台灣聖公會長齡生命關懷中心、日本社會福利法人紘德會、越南中央熱帶疾病醫院、四川省廣元市第一人民醫院醫院醫療團隊、四川省西南醫科暨攀枝花人民醫院、四川省遂寧市第三人民醫院、四川省廣安市人民醫院、四川省自貢市第一人民醫院醫療團隊參訪團等國內外團體蒞臨指導及觀摩學習，共 8 場次，16 小時，參訪人數 181 人。

二、持續推動健康醫院，榮獲全國優良獎

臺北市立關渡醫院雖然是一家社區醫院，在創院之始翌年民國 90 年即取得臺北市第一屆健康醫院認證，民國 97 年加入世界衛生組織（WHO）之健康促進（HPH）網絡會員。民國 99 年榮獲國家級生策會品質認證，民國 106 年再度申請國民健康署整合健康促進、高齡友善與無菸醫院首屆健康醫院認證，以優異成績認證通過。107 年再度申請衛生福利部國民健康署健康醫院典範選拔，榮獲優良獎機構，未來將更積極透過社區資源整合，跨單位結盟，引入資訊化，積極提升病人、社區民衆及員工健康識能，打造健康社區及幸福企業，朝向健康醫院典範邁進。

臺北市立關渡醫院除致力健康醫院推動外，對於員工工作環境安全與優化、福利與健康活動亦非常重視，107 年行政單位及護理之家分別參與醫策會首屆醫療職場 Joy in Work 競賽，雙雙獲得佳作獎。另外申請國民健康署之健康職場認證效期展延通過，職場健康推動專責人員職安室張繼仁同仁獲頒推動績優人員獎。

三、推動醫病共享決策（Shared Decision Making），醫病溝通改革全院動起來

臺北市立關渡醫院SDM實踐運動在高層主管帶領成立專案推動小組，展開跨單位及醫事別間的共識與整合，提升認知策略包含全院教育訓練、院際研習會、科部會議、民衆宣導，遴派臨床人員參與 Coaching 及國際研討會訓練；在流程面策略依據主題類別改造看診流程，及運用創意讓病人參與決策；結果面除該 2 項主題之實踐運動外，依據慢性疾病臨床特性醫務部門開發 10 項輔助工具，舉辦院內競賽獎勵及專家輔導，並不斷求新與檢討，希望提升病人自我能力評估，以選擇適合方式。

主動參與財團法人醫院評鑑暨醫療品質策進會 107 年醫病溝通實踐運動，執行「末期腎臟病治療選擇」主題優化活動，依據公版輔助工具及影片於門診、社區及住院進行推動，並藉以活動宣導品提升填答率，透過醫療專業人員共同合作，希望民衆對於各項醫療選擇決定都是在獲得充分實證醫療資訊中，依據自我能力選擇，獲頒感謝狀。



(10) Becoming a Designated Demonstration Organization for Community Long-Term Care Point for Domestic and Overseas Institution Visitors

Taipei Municipal Gan-Dau Hospital has committed significant efforts in the promotion of community long-term care and has thus been widely acknowledged as a designated demonstration organization in this area for various domestic and overseas institutions. In 2018, the hospital has received delegations from various organizations and institutions including Association of Taiwan Health Promotion and Education, Church Zhixing, Advent Church Center, Social Welfare Corporation Kotokukai, Vietnam's National Hospital of Tropical Diseases, medical team from The First People's Hospital of Guangyuan (Sichuan Province), Southwest Medical University & Panzhihua People's Hospital (Sichuan Province), The Third People's Hospital of Suining (Sichuan Province), People's Hospital of Guangan City (Sichuan Province), The First People's Hospital of Zigong City and so forth for visits and demonstrations over a total of 8 sessions (16 hours). The total number of foreign visitors came to 181.

2. Received the National Outstanding Award for continued efforts in the promotion of a healthy hospital

Despite being a community hospital, Taipei Municipal Gan-Dau Hospital was among the first hospitals to be certified as a healthy hospital in Taipei City in the following year of its initiation in 2001. The hospital later became a member of World Health Organization's Health Promoting Hospitals and Health Services (HPH) network in 2008. In 2010, the hospital received quality certification from the Institute for Biotechnology and Medicine Industry (IBMI). Later, the Health Promotion Administration integrated the health-promoting, senior-friendly and smoke-free hospitals to conduct health hospital recognition for the first time in 2017 and Gan-Dau Hospital passed the recognition with outstanding performance. In 2018, Gan-Dau Hospital again applied for entry in Ministry of Health and Welfare Health Promotion Administration's selection for exemplary healthy hospitals and received the award of "Outstanding Institution". In the future, the hospital will strive to improve the health literacy for community residents and employees by integrating community resources, establishing cross-unit alliances, and introducing information systems in the hopes of creating health communities and happy enterprises and thereby becoming a model of healthy hospital.

Apart from active promotion of healthy hospital, Gan-Dau Hospital also places great value in the safety and optimization of employees' work environment and the benefits and health related activities that are accessible to them. In 2018, the hospital's administration and nursing home participated in the first Joy in Work competition held by the JCT and both received honorable mentions. In addition, the hospital's application to extend its certification as a healthy workplace by the Health Promotion Administration has also been approved, with designated personnel Chang Chi-Jen (from the Occupational Safety Office, responsible for workplace health promotion) receiving the award of "Outstanding Personnel" for his efforts in relevant promotions.

3. Promotion of Shared Decision Making (SDM) and Reform of Doctor-Patient Communication in the Hospital

A project team was formed for the SDM implementation movement under the leadership of the top management in Taipei Municipal Gan-Dau Hospital. Consensus and integration activities were conducted among different departments and medical fields to improve the cognitive strategy including educational training applicable to the entire hospital, inter-hospital seminar, department meeting, and dissemination to the public. Clinical personnel were dispatched to participated in coaching and international conferences. As for the strategies in the process, the diagnosis process was reformed based on different themes and creativity was used for the reform. Opportunities for participation in the decision were given to the patient. As for the results, in addition to implementation movement of the 2 themes, the medical service department developed 10 aids based on the clinical characteristics of chronic disease. Internal contests, incentive events, and expert support activities were held. Gan-Dau Hospital looks for novelties and introspects itself all the time in the hopes of improving the self-assessment of capability among the patients so that they can make informed selection of the best methods available.

Gan-Dau Hospital participated in the doctor-patient communication movement held by the Joint Commission of Taiwan in 2018 and promoted the optimized thematic event of "ESRD treatment preference" to the outpatients, communities, and inpatients using the official aids and videos. The gifts used during the dissemination were helpful for raising the fill-in and answer rate. Through the cooperation between the professional medical personnel, the public is expected to select from different medical options based on their capability and adequately proved medical information. The hospital has received certification of appreciation for its efforts.



107 年度參與醫策會決策輔具工具競賽，「我要出院了，該何去何從？」獲選工具入選獎。醫病共享決策推動小組唐鳳屏專科護理師參與國健署「健康醫院創意計畫選拔活動」，以「雙向溝通好簡單、醫病關係不卡關」專案發表榮獲優等獎。

四、推廣全民均健自我健康管理

（一）推動無菸醫院健康社區

臺北市立關渡醫院於民國 102 年榮獲無菸醫院認證，民國 107 年榮獲戒菸服務品質改善措施績優醫事機構。107 年持續全面推動菸害防制服務，包括提供門診戒菸、提供戒菸諮詢專線、辦理戒菸班，於院區、社區、職場、學校推動菸害宣導等多項服務，並進入各企業團體協助員工戒菸，協助病人、員工及社區民衆免於菸害，實踐無菸健康生活。

除此戒菸團隊更提報「心臟科門診病人戒菸衛教收案率之改善專案」參與第 26 屆健康促進醫院國際研討會海報發表，及榮獲第 10 屆 TCHA 醫院品質提升競賽成果發表金牌獎。

（二）推動社區健康飲食管理

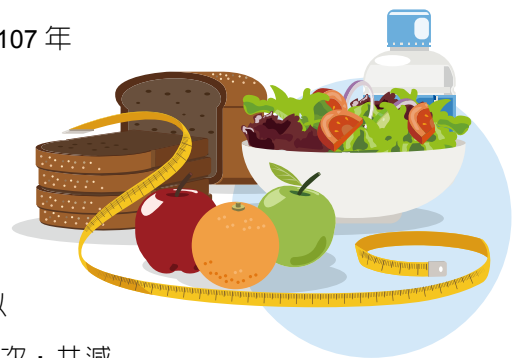
配合衛生福利部國民健康署健康體位政策，民國 107 年推動職場「健康減重 幸福關渡」活動，參加者共有員工 103 人，共減重 219.7 公斤，其中減重 8 公斤以上有 2 位；6 公斤以上的共有 10 位。推出 500 卡輕食餐供員工訂購，輕食餐自 5 月至 10 月

止，共訂購 1,243 份，其中訂輕食餐減重達 5 公斤以

上者，共有 4 位。減重課程 5 堂，參加者共約 68 人次，共減

重 24.6 公斤。拳擊有氧運動課程 12 堂，參加者共約 214 人次，共減重 48.8 公斤。並以「探討臺北某地區醫院健康促進活動對員工減重之成效」參加 107 年亞洲膳食營養大會海報發表。

除院內的減重活動外，另協助社區體位減重活動及校園巡迴學童體位控制營養課程，共 6 場，參加者共約 1,008 人次。



（三）辦理國小校園巡迴列車衛生保健服務

民國 107 年持續於校園推動健康促進理念及議題，透過與學校、衛生機關以及家庭共同合作，激勵學生、師長以及家長共同推展健康教育之宣導，讓未來主人翁能擁有健康的知識、技能，進而影響態度與健康行為之改變，降低慢性疾病之危害程度，也讓學生將衛生保健常識及技巧落實於日常生活，所推動的健康行為包括口腔保健、視力保健、健康體位及菸害防制等衛教。



Participation in JCT's decision-making assistive tool competition in 2018 with "Where to go from now after being discharged?" And received the nomination award. Nurse Ms. Feng-Ping Tang from the SDM Promotional Team participated in Health Promotion Administration's "Healthy Hospital Creative Project Selection" and received the Award of Excellence with her proposal of "Easy bilateral communication to facilitate smooth doctor-patient communication".

4. Promote Citizen Health Self-Management

(1) Promote Smoke-Free Hospital and Healthy Community

Gan-Dau Hospital received the smoke-free hospital recognition in 2013 and later in 2018, the hospital was named as an outstanding medical institution in smoking-cessation service quality improvements. In 2018, it continued to comprehensively promote smoke hazard prevention services, such as providing smoke quitting clinics, provide smoke quitting consultation lines, organize smoke quitting classes, hold smoke hazard promotions at the hospital, communities, work places and schools, and various services. It also directly enters each corporation and groups in helping employees to quit smoking, helps patients, associates and community. Residents stay away from smoke hazard, and implements a smoke-free healthy life.

Not only that, the hospital's smoke-cessation team also submitted the "Cardiology patient smoke-cessation case closing rate improvement project" to take part in the poster publication at the 26th International HPH Conference and received the gold medal award for in the 10th TCHA Hospital Quality Improvement Competition.

(2) Promote Community Healthy Diet Management

To support the healthy body policy of the Health Promotion Administration, Ministry of Health and Welfare, Gan-Dau Hospital organized the event of "Healthy Weight Loss and Happy in Guandu" in 2018. 103 employees participated in the event and reduced 219.7kg of weight. 2 of them reduced more than 8 kilograms and 10 of them reduced more than 6 kilograms. Gan-Dau Hospital provided light meals of 500kal for the employees to order during the period from May to October. A total 1,243 sets were orders. 4 of the employees who placed the light meal order were able to lose 5 kg or more in weight. The hospital held 5 weight-loss trainings for approximately 68 participants, who lost a combined weight of 24.6 kg. The hospital also held 12 sessions of cardio boxing workouts for 214 participants, who lost a combined weight of 48.8 kg. In addition, the hospital also took part in the poster presentation in the 7th (2018) Asian Congress of Dietetics with "A case study on health promotional activities implemented by a regional hospital in Taipei City and their effects on employees' weight loss".

In addition to the weight-reduction event in the hospital, Gan-Dau Hospital assisted communities in organization of weight-reduction activities and provided campus weight control and nutrition courses for school children. 6 courses were provided with about 1,008 participants.

(3) Organize Elementary School Campus Touring Sanitation and Health Services

In 2018, the hospital has continued to promote health promotion ideas and issues in campuses. With the cooperation of schools, health authorities and families, it inspired students, teachers and parents to commonly promote health education and allowed our future backbones to possess health related knowledge and skills, thus making them change their attitude and health behaviors. This will minimize the hazards of chronic diseases and allow students to implement sanitation and health knowledge into their daily lives. Health related behaviors that have been promoted include oral sanitation, eyesight protection, healthy body, tobacco hazard prevention and so forth.



五、落實社區四大防癌篩檢

積極參與國民健康署 107 年醫院癌症品質精進計畫，持續於門診社區推動四癌（子宮頸癌、乳癌、大腸癌及口腔癌）篩檢，藉由癌篩便捷提示及開單資訊系統，提供患者醫療或陽性個案轉介服務及預約與追蹤。針對 50-70 歲民眾接受大腸癌篩檢，民國 107 年受檢共計 1,473 人，陽性個案 77 人；針對 30 歲以上民眾接受口腔篩檢計 141 人，陽性個案 22 人。45-69 歲婦女 2 年內未做乳房攝影檢查者，107 年接受乳房攝影檢查共計 413 人，陽性個案 26 人；30-69 歲 2 年以上未滿 6 年未做子宮頸癌防治，107 年受檢共計 624 人，陽性追蹤人數 17 人，陽性個案轉介完成數 17 人，陽性轉介完成率 100%，結果異常者均指導就醫及追蹤管理。

與臺北市北投區健康服務中心舉辦社區健康暨癌症篩檢活動，共同深入社區提供一般性及預防性之醫療保健服務及衛生教育宣導，107 年共舉辦 8 場次，口腔篩檢服務 49 人，大腸癌檢 210 人。另外配合每年節慶活動辦理健康篩檢活動 107 年共計 3 場次，580 人次參與。門診舉辦癌症防治宣導講座共計 6 場次，共計 160 人次參與。

另持續將常見疾病如氣喘、糖尿病、B 型或 C 型肝炎、慢性腎臟病（CKD）、末期腎臟病前期（Pre-ESRD）、氣喘等疾病個案管理追蹤系統，由個案衛教師收案及個別指導追蹤，進行慢性病個案收案健康評估及介入，擴大癌症篩檢和提升醫療品質。榮獲臺北市政府衛生局頒發 107 年度癌症防治績優獎，癌症防治進步獎及防癌天使服務獎。

六、主動提供弱勢家庭血糖檢測儀，做好監控降低糖尿病併發症

臺北市立關渡醫院為衛生福利部中央健康保險署「糖尿病品質支付服務方案」之醫療院所，自民國 99 年起參與糖尿病品質支付服務方案，民國 103 年完成衛生福利部國民健康署之「糖尿病健康促進機構認證」通過，107 年持續參與服務方案，於門診區設置糖尿病衛教室及成立「糖沐宗書院病友團體」提供跨科別轉介之便利性及舒適的環境，及設立 LINE 群組提供病友糖尿病衛教知識。榮獲「106 年度臺北市糖尿病共同照護網照護品質績優醫療院所－整體品質獎」、「107 年提升糖尿病健康促進機構照護計畫之執行成果－佳作獎」、「107 年提升糖尿病健康促進機構照護計畫創新特色-優等獎」。





5. Implementation of four-cancer screening in communities

The hospital has continued to take part in the 2018 Hospital Cancer Treatment Quality Improvement Project launched by Health Promotion Administration and actively encourage and promote four-cancer (cervical cancer, breast cancer, colorectal cancer and oral cancer) screening in clinics. With convenient cancer screening result and billing information system, the hospital provides patients with medical or positive case referral services and reservation & tracking. In terms of citizens in the 50-70 year-old age group who have received colorectal cancer screening, a total of 1,473 citizens completed the screening in 2018, with 77 cases having tested positive; a total of 141 citizens over the age of 30 completed their oral screening, with 22 cases having tested positive. For women in the age group of 45-69 who had not taken a mammography examination in the past 2 years, a total of 413 women completed their mammography examination in 2018 and 26 tested positive; among women in the age group of 30-69 who had not taken a pap smear for more than 2 years (but not over 6 years), a total of 624 women completed their pap smear in 2018. 17 cases that tested positive were tracked and referred with a 100% referral rate. All cases that had abnormal results were asked to seek medical assistance and followed-up.

The hospital also collaborated with Beitou District Health Center by jointly organizing a community health & cancer screening event in order to reach deeper into the community by providing general and preventive healthcare services and promote health education. In 2018, a total of 8 sessions were held, with 49 citizens taking their oral screening and 210 citizens going through colorectal cancer screening. The hospital has also been organizing relevant health screening events in conjunction with specific festivals on a yearly basis. In 2018, a total of 3 sessions were held for 580 participants. 6 sessions of cancer prevention seminar were held at the clinic for a total of 160 participants.

In addition to that, Gan-Dau Hospital has continued to establish asthma, diabetes, hepatitis and kidney illness case tracking system on common illnesses such as asthma, diabetes, hepatitis B or C, Chronic Kidney Disease (CKD), Pre-end Stage Renal Disease (Pre-ESRD), and asthma. Individual health education teachers will undertake these cases and provide individual instruction and tracking, and conduct chronic disease individual case health evaluation and intervention, thus expand cancer screening and improve medical quality. The hospital received the Outstanding Performance in Cancer Prevention Award, Cancer Prevention Improvement Award and Cancer Crusade Angel Service Award from the Department of Health, Taipei City Government in 2018.

6. Taking initiative to provide blood-glucose meter to disadvantaged families to ensure adequate monitoring and prevent diabetes complications

Gan-Dau Hospital is one of the medical institutions listed by the National Health Insurance Administration, Ministry of Health and Welfare, with "Diabetes Quality Purchase Service Solution". The hospital has participated in Diabetes Quality Purchase Service Solution since 2010 and passed the "Diabetes Health Promotion Institution Recognition" conducted by the Health Promotion Administration, Ministry of Health and Welfare in 2014. In 2018, it continued to participate in the aforementioned service projects and held diabetes classrooms in the clinic area and the "Diabetics' Academy" along with cross-division referral for convenience in a comfortable environment. Not only that, the hospital has also setup LINE groups for diabetic patients to offer relevant health information on diabetes. The hospital has received the "2017 Outstanding Quality Medical Institution in Taipei City for Diabetes Common Care Network - Overall Quality Award", "2018 Improvement in Health Promotion for Diabetic Patients Institutional Care Project Implementation Outcome - Honorable Mention" and "2018 Improvement in Health Promotion for Diabetic Patients Institutional Care Project for Innovative Features - Outstanding Award".

七、持續推廣腎臟病防治及提升照護品質

臺北市立關渡醫院於民國 100 年 5 月開始加入推廣慢性腎臟病促進照護計畫方案，截至 107 年底慢性腎臟病總收案人數 467 人，尚在追蹤 397 人，占 85%，已結案 54 人占 11.6%；以 Stage 3b 最多占 30.7%，次之為 Stage 4 占 24.7%。107 年舉辦腎友座談會 3 次，共 45 人次參與，《關渡人月刊》發表文章共計 1 篇，10 月與臺北榮民總醫院合辦 1 個場次的慢性腎臟病繼續教育課程共 242 人次參與，參與社區腎臟病宣導活動共 5 個場次約 699 人次參與，期望透過早期預防早期治療，降低末期腎臟病的發生率。

八、重視病人安全及醫病溝通，榮獲醫策會全面動員獎及創新獎

每年 10 月第 3 週配合國際病安週活動，107 年度使用彩繪氣球結合人偶活潑造型設置病安週宣導專區，吸引民衆注意及合影，並於 @line、FB 及直播等方式，增加訊息能見度，以增進對 SDM 認知。宣誓當日邀請社區團體進行表演，並結合重陽節活動（包括：血糖、血脂、血壓、營養諮詢及健康體位檢測及四癌篩檢，於現場提供糖尿病、腎臟保健進行衛教及輔助工具之實踐），並設立病人安全我會應響應卡填寫攤位，提供一對一之問答。榮獲醫策會頒發「107 年病人安全週－病人安全我會應」動員獎及創意獎。



▲ 病人安全週宣導榮獲醫策會頒發創意獎及動員獎
Patient Safety Week Promotion received the Creative and Mobilization Awards from the Medical Council

除此，於該期間辦理院內之 SDM 實踐運動及病安改善專案之競賽活動完成 4 項實踐運動入圍及 13 項醫品病安改善專案成果入圍，入圍者進行口頭發表邀請學者專家評選，成果結合 106 年官網首頁建置 SDM 專區，將民國 106 年至 107 年已自行開發之 10 項輔助工具及實踐運動之成果採用專區供醫護人員及民衆參考，共有 8,000 人瀏覽。

另外，依據對象套特性辦理多場次之社區民衆、病友團體及院內員工之宣導及專業課程：社區民衆及病友團體共 22 場 800 人次，對 SDM 認知正確率 92%，整體滿意度 95%；院內員工 5 場 863 人次，對 SDM 認知正確率 92%，整體滿意度 95%，院內員工整體參與率超過 70%，提升醫護人員對於醫病共享決策的概念，將 SDM 內化為一種醫療文化，讓醫療人員融入臨床實務當中，建立尊重與互信的醫病關係。

運用民國 107 年開發之「腦中風或其他疾病導致吞嚥困難病患，該進行鼻胃管置入或胃造瘻管？」工具，並結合醫策會公版「長期使用鼻胃管，該不該進行內視鏡胃造瘻術？」影片導入，介入 19 位病人與家屬後，選擇維持鼻胃管使用 15 位，3 位考慮準備改為進行胃造瘻管置入，1 位個案無法確定選擇。病人或家屬對 SDM 輔助工具進行決策滿意度 92.8%，整體滿意度達 95%。



7. Continued promotion for kidney disease prevention and improvement of care quality

Taipei Municipal Gan-Dau Hospital has participated in the Chronic Kidney Disease Promotion and Care Program since May 2011. As of the end of 2018, a total of 467 CKD cases were accepted; 397 cases (85%) were under tracking, and 54 cases (11.6%) were closed. The majority of the cases were in Stage 3b at 30.7%, followed by Stage 4 at 24.7%. 3 discussion meetings of diabetics were held in 2018 with 45 participants. 1 articles were published on the “Gan Dau Monthly”. In addition to the CKD continuation education course with 242 participants held jointly with Taipei Veterans General Hospital in October, it participated in 5 sessions of community kidney disease dissemination activities with about 699 participants in the hope to reduce the occurrence rate of the end-stage kidney disease through early prevention and treatment.

8. Emphasizing patient safety and doctor-patient communication and winning the “Total Involvement Award” and “Innovation Award” from JCT

The hospital has been organizing specific events during the 3rd week of October each year in conjunction with the International Patient Safety Awareness Week (PSAW). In 2018, the hospital has chosen to create a PSAW promotional area on premise with illustrated balloons and mascots to draw the attention of visitors, who would be prompted to take pictures of the props and decorations. In addition, the hospital also leveraged channels such as @line, FB live streaming and other streaming services to increase exposure on PSAW in order to help the general public learn more about SDM. On the day of the oath ceremony, the hospital invited various community groups to perform in conjunction with the planned activities for the Double Ninth Festival (including: blood glucose, blood lipid, blood pressure measurements, nutrition-related consultations, healthy body measurements, four-cancer screening, health education for diabetes and kidney protection and use of relevant assistive tools). A booth has also been set up for participants to fill out their “I Respond to Patient Safety” card with one-on-one Q&A. Received the mobilization award and creativity award from JCT for the “2018 Patient Safety Week- I Respond to Patient Safety” initiative.

Apart from that, the hospital has also implemented four practice implementations for SDM and patient safety improvement project, along with 13 healthcare quality and patient safety improvement projects for the competition. The selected representatives were asked to make oral presentations to be reviewed by a panel of scholars and experts and the results were published on the hospital’s official website in conjunction with the 2017 construction of the SDM section. 10 assistive tools that the hospital developed independently between 2017 and 2018 along with the results of various practice implementations were posted in the section for the reference of medical personnel and interested members of the public. These contents were viewed by 8,000 visitors.

In addition, the hospital has also organized numerous disseminations and professional courses for community residents, patient groups and employees: 22 sessions for community residents and patient groups with 800 participants, with accurate recognition rate for SDM at 92% and overall satisfaction of 95%; 5 sessions for hospital employees with 863 participants, with accurate recognition rate for SDM at 92% and overall satisfaction rate of 95%. The overall participation rate for hospital employees exceeded 70% as well. These activities help to strengthen medical staffs’ awareness and understanding for shared decision making between doctors and patients and enable them to internalize SDM as a healthcare culture through the incorporation of medical personnel in relevant clinical practices to foster doctor-patient relationship that is characterized by mutual respect and trust.

Through the tool of “Nasogastric Tube Intubation or Gastrostomy Catheter for Patents with Difficulty in Swallowing due to Brain Attack or other Afflictions” developed in 2018, coupled with the official video “Should percutaneous endoscopic gastrostomy be administered to patients who have been using nasogastric tube intubation for extended periods of time” produced by JCT, intervention was proposed to 19 patients and their families. 15 of them chose to maintain their use of nasogastric tube while 3 considered switching to percutaneous endoscopic gastrostomy, with the remaining 1 unable to provide a definitive answer. Patient and their families satisfaction from using SDM as an auxiliary tool for decision making came to 92.8%, with an overall satisfaction rate of 95%.



九、落實失智症個案管理及關懷服務

為強化臺北市失智症服務網絡，民國 107 年配合臺北市政府衛生局失智症個案管理關懷服務計畫，提升醫院失智個案管理量能，並提升失智個案及家庭照顧者運用臺北市失智症服務網絡能力，以減輕其照顧壓力。臺北市立關渡醫院在接下計畫之後，立即成立失智症團隊，每月固定召開跨部門個案討論會，舉辦 3 場院內專業人員失智相關教育訓練以及 2 場失智症團體活動。自民國 107 年 4 月至 11 月，總計收案數 65 人，結案 2 位（1 位死亡、1 位兩次以上未接電話），期間門診追蹤 155 人次，電訪 222 人次，到府追蹤 8 人次；根據個案的不同需求，提供石頭湯聯絡資訊 26 人、協助轉介長照、申請輔具、居家復健等 8 人、醫療協助協助 3 人、申請身障手冊 7 人、經濟需求轉介社工 1 人、提供愛心手鍊申請同意書 3 人、傷口照護技巧 1 人、管路照護技巧 1 人、日照中心 1 人。

一系列從醫院到社區後，再進入到失智症家裡的整合照顧，目的就是提供全方位的服務輸送，增強長期照護之可及性、可近性、整合性、便利性、負擔性以及可接受性，讓失智失能的長者能夠獲得充分的照顧，同時又能讓家屬減輕負擔。

十、擴大辦理急性後期照護

臺北市立關渡醫院於民國 103 年配合中央健康保險署腦中風急性後期照護計畫，設有腦中風急性後期復健專屬病床 10 床，民國 107 年起配合擴大推動範圍，申請包括腦中風、燒燙傷、創傷性神經損傷、脆弱性骨折、衰弱高齡病患等五大類對象，並由神經內科、家醫科及復健科醫師，網羅復健師、營養師、社工師、臨床心理師、藥師及護理師等團隊，規劃病人復健及返家計畫，給予各項專業照護及出院前準備。為應不同患者間需求，並於 107 年初申請擴大為 101 床，包括健保病床、雙人及單人差額病床。

十一、與鄰近大專院校簽訂產學合作

臺北市立關渡醫院與鄰近國立陽明大學、臺北護理健康大學、臺北城市科技大學及臺北海洋科技大學等校簽訂產學合作聯盟，冀望藉由醫院臨床實務、社區醫學及長期照顧服務推動經驗與學術研究結盟及分享，並做為高齡健康及銀髮保健等系所臨床實習場域。



▲ 臺北市立關渡醫院與陽明大學產學合作
Taipei Municipal Gan-Dau Hospital and National Yang-Ming University Industry-Academia Cooperation



9. Implementing dementia case management and care services

In an effort to strengthen the dementia care service network in Taipei City, the hospital has collaborated with the Department of Health, Taipei City Government in 2018 in the dementia case management care service project to improve the hospital's management capacity for dementia cases while helping patients and their family caretakers to be better equipped in utilizing the dementia service network in Taipei City so as to lighten their work load and stress. Upon undertaking the project, Taipei Municipal Gan-Dau Hospital promptly established its dementia team while holding monthly inter-departmental case discussion meetings. In addition, the hospital also held 3 sessions of dementia related training for relevant hospital personnel and 2 sessions of group activity for dementia patients. Between April and November 2018, the hospital registered a total of 65 cases, with 2 cases closed (one passed away and the other did not answer the phone in two separate attempts at contact). During this period, the hospital tracked 155 patients, made 222 telephone calls and visited 8 patients at their homes. In accordance with their various needs, the hospital provided contact information for the Stone Soup Project for 26 patients; assisted in the referral for long-term care/application for assistive tools/provided home rehabilitations for 8 patients; provided medical assistance for 3 patients; assisted with the application for Disability Card for 7 patients; assisted with 1 referral to social worker due to need for financial assistance; provided consent form for the application of The Bracelet of Love for 3 patients; provided guidance on wound care for 1 patient, catheter care techniques for 1 patient and referred 1 patient to daycare center.

The purpose of such a series of integrated care services that progress from the hospital, to the communities and ending at the homes of dementia patients is to provide holistic delivery of services to improve the availability, accessibility, integration, convenience, afford ability and acceptability of long-term care so that disabled seniors/seniors with dementia can receive adequate care while their family members will be able to lighten the burden on their shoulders.

10. Broaden Post-Acute Care

Coordinating with the post-acute care plan of the National Health Insurance Administration for CVE patients, Gan-Dau Hospital established 10 post-acute rehabilitation exclusive beds for CVE patients in 2014. It broadened the applicability of the plan in 2018 and applied for five categories of CVE, burn injury, traumatic nerve injury, fragility fracture, and elderly patients of frailty. The doctors from the departments of neurology, family medicine, and rehabilitation worked with the teams of rehabilitation therapists, nutritionists, social workers, clinical psychiatrists, pharmacists, and register nurses to make rehabilitation and home-returning plans for the patient and provide various professional care and discharge services. Application for increase of the exclusive beds to 101, including health insurance, twin and single beds, was raised at the end of 2018 to meet the requirements of different patients.

11. Entering into industry-academy cooperation program with neighboring colleges and universities

Taipei Municipal Gan-Dau Hospital has entered into agreements of industry-academy cooperation program with neighboring academic institutions including National Yang-ming University, National Taipei University of Nursing and Health Sciences, Taipei City University of Science & Technology and Taipei University of Marine Technology in the hopes of initiating strategic alliance and sharing of the hospital's experiences in clinical practices, community medicine and long-term care promotion to be combined with academic researches while providing a venue of clinical internship for students in relevant departments such as gerontology health management and care.



十二、臺北地區社區醫療最佳醫院

臺北市立關渡醫院提供病人為中心之優質醫療及全人服務，獲得政府部門與社區民衆的高度支持。民國 107 年各項所推動之成果均榮獲國家獎項及殊榮，包括：院外服務品質提升得獎 19 件、品質改善方案參賽 13 件、國際研討會學術發表 11 篇。

表 6 民國 107 年參與院外服務品質提升競賽獲獎一覽表

序次	名稱	主辦單位	獎項 / 發表
1	107 年提升糖尿病健康促進機構照護品質計畫之機構創新特色	衛生福利部	優等獎
2	107 年全國績優健康職場及優良推動人員	衛生福利部國民健康署	健康職場優良推動人員獎
3	107 年病人安全週－病人安全我會應	財團法人醫院評鑑暨醫療品質策進會	動員獎及創意獎
4	107 年度健康醫院創意計畫選拔－其他類「雙向溝通好簡單－醫病關係不卡關」	衛生福利部國民健康署	優等獎
5	107 年健康醫院典範暨創意計畫選拔	衛生福利部國民健康署	優良獎
6	107 年第十屆「TCHA 品質指標措施暨品質持續改善海報成果發表會」	台灣社區醫院協會	二金、一銀、三佳作、三入選、一潛力等之佳績
7	106 年度醫療安全督導考核作業考評	臺北市政府衛生局	特優
8	107 年度臺北市推動癌症防治績優醫院	臺北市政府衛生局	癌症防治績優獎、進步獎、防癌天使服務獎
9	預立安寧緩和醫療暨維生醫療抉擇意願－健保 IC 卡註記宣導	衛生福利部	優良團體獎牌
10	107 年度癌症篩檢傑出創意選拔活動	衛生福利部國民健康署	佳作獎
11	2018 樂齡活現阿公阿嬤活力旺全國競賽	衛生福利部國民健康署	金牌獎
12	2018 北區阿公阿嬤活力秀競賽	衛生福利部國民健康署	金牌獎
13	2018 臺北市『銀髮青春活力秀』比賽	衛生福利部國民健康署	最佳活力獎
14	2018 北投區阿公阿嬤活力秀比賽	衛生福利部國民健康署	魅力獎
15	國民健康署健康職場認證健康促進標章(2018～2021 年)	衛生福利部	通過標章
16	107 年臺北市醫療安全品質提升提案獎勵活動」地區醫院組	臺北市政府衛生局	一金 一銀 二佳作
17	106 年度臺北市糖尿病共同照護網照護品質績優醫療院所	臺北市政府衛生局	整體品質獎
18	106 年度預防接種合約醫療院所地區醫院組	臺北市政府衛生局	績優獎
19	107 年度提升糖尿病健康促進機構照護品質計畫之執行成果	衛生福利部	佳作獎



12. Best Community Medical Service Hospital in the Greater Taipei Region

Taipei Municipal Gan-Dau Hospital has actively provided outstanding patient-oriented medical and comprehensive services, which were highly praised by governmental agencies and by community residents. All the promotion results received national awards or honors in 2018, including 19 external service quality enhancement projects, 13 quality enhancement projects and 11 international symposium and academic conference presentations.

Table 6 List of awards and distinctions won in external service quality improvement competitions in 2018

No.	Name	Host	Award
1	2018 Caring Quality Improved Project for Diabetes Health Promotion Institution: Outstanding Award for Innovative Feature of the Institution	Ministry of Health and Welfare	Outstanding Award
2	2018 National Outstanding Healthy Workplace and Outstanding Promotion Personnel	Health Promotion Administration, Ministry of Health and Welfare	Outstanding Promotion Personnel Award for Healthy Workplace
3	2018 Patient Safety Week I Respond of Patient Safety	Joint Commission of Taiwan	Mobilization Award and Creativity Award
4	2018 Healthy Hospital Creative Project Selection - Other Category with "Easy bilateral communication to facilitate smooth doctor-patient communication"	Health Promotion Administration, Ministry of Health and Welfare	Outstanding Award
5	2018 Exemplary Healthy Hospital and Creative Project Selection	Health Promotion Administration, Ministry of Health and Welfare	Outstanding Institution Award
6	2018 10 th TCHA Quality Indicator Measure and Consistent Quality Improvement Poster Presentation	Taiwan Community Hospital Association	Impressive results with 2 gold medals, 1 silver medal, 3 honorable mentions, 3 nominations and 1 entry for potential
7	2017 Supervision and Assessment of Medical Safety	Department of Health, Taipei City Government	Distinguished hospital
8	2018 Taipei City Cancer Prevention Promotion Hospital with Outstanding Performance	Department of Health, Taipei City Government	Outstanding Performance in Cancer Prevention Award, Cancer Prevention Improvement Award and Cancer Crusade Angel Service Award
9	Promotion of Annotations on Hospice Palliative Care and the Selection Intent of Life-Sustaining Treatment on the Health Insurance IC Card	Ministry of Health and Welfare	Group Outstanding Award
10	2018 Outstanding Creativity in Cancer Screening Selection	Health Promotion Administration, Ministry of Health and Welfare	Honorable mention
11	2018 Energetic Seniors - Grandpa & Grandma Vitality National Competition	Health Promotion Administration, Ministry of Health and Welfare	Gold Medal
12	2018 Grandpa & Grandma Vitality Show in Northern Taipei	Health Promotion Administration, Ministry of Health and Welfare	Gold Medal
13	2018 Taipei City "Senior Energy and Vitality Show" Competition	Health Promotion Administration, Ministry of Health and Welfare	Most Energetic Award
14	2018 Grandpa & Grandma Vitality Show in Beitou District	Health Promotion Administration, Ministry of Health and Welfare	Best Charisma Award
15	Health Promotion Administration Healthy Workplace Recognition Health Promotion Label (2018-2021)	Ministry of Health and Welfare	Qualified for the Label
16	2018 Event Proposals for Improvement of Medical Safety and Quality in Taipei City Incentive Program in the category of regional hospital	Department of Health, Taipei City Government	1 gold medal 1 silver medal 2 honorable mentions
17	2017 Outstanding Quality Medical Institution in Taipei City for Diabetes Common Care Network	Department of Health, Taipei City Government	Overall Quality Award
18	2017 Preventive Vaccination Contracted Medical Institution - Regional Hospital Category	Department of Health, Taipei City Government	Outstanding Performance Award
19	2018 Caring Quality Improved Project for Diabetes Health Promotion Institution: Outstanding Award for Implementation Outcome	Ministry of Health and Welfare	Honorable mention

第七篇
完善
長照安寧



7

Perfect Long-Term Care and Tranquility





第七篇 完善長照安寧

第一章 提供可近性、可用性之長照服務資源

第一節 建立跨部門整合機制

臺北市政府長期照顧委員會由市長擔任召集人，並由社會局、民政局、財政局、教育局、交通局、勞動局、都市發展局、資訊局及法務局等相關局處組成委員會，建立跨部門整合機制，並聘請相關學者專家、民間機構團體代表及服務使用者代表，共同研商規劃臺北市長期照顧政策推動方向，開發長期照顧資源，以建構多元性、全面性的長照服務，並提升臺北市長期照顧服務品質及權益保障等相關事項，民國 107 年已召開 4 次會議。長期照顧委員會下設 7 個跨局處工作小組（長照服務組、失智網絡組、研發創新組、人力資源開發組、輔助科技與資訊整合組、設施及環境資源建置組、協調及審議與權益保障組），每年定期召開會議，並運用各小組的溝通協調平臺，達到推動目標的共識，依各局處權責發揮完善的服務整合，持續強化小組運作功能，以加速長照服務體系發展；另由衛生局及社會局之業務單位每月定期召開長期照顧業務首長聯繫會議及業務聯繫會議，107 年已各召開 12 次會議。



▲ 臺北市政府長期照顧委員會
Long-Term Care Committee, Taipei City Government



Part 7 Perfect Long-Term Care and Tranquility

Chapter 1 Provision of Accessible and Available Long-Term Care Resources

Section 1 Establishment of a Cross-Department Integration Mechanism

The Mayor is the convener of the Long-Term Care Committee, Taipei City Government. It is comprised of the Department of Social Welfare, Department of Civil Affairs, Department of Finance, Department of Education, Department of Transportation, Department of Labor, Department of Urban Development, Department of Information Technology, and Department of Legal Affairs etc. The Long-Term Care Committee establishes a cross-department integration mechanism. Scholars, experts and the representatives from the private institutions and organizations as well as the service users are invited to discuss and plan the promotion direction of the long-term care policies in Taipei City and develop long-term care resources in order to provide diversified and nation-wide long-term services, improve the long-term care quality of Taipei City, and protect related rights and interests. 4 meetings were held in 2018. The Long-Term Care Committee has 7 cross-department sections (Long-Term Care Section, Dementia Network Section, Research, Development and Innovation Section, Human Resources Section, Assistive Technology and Information Integration Section, Facilities and Environmental Recourses Section, and Coordination, Review and Rights Protection Section). The Committee holds regular meetings every year. Through the communication and coordination platform of each section to achieve consensus for the goal, comprehensive integration of relevant services is achieved with the involvement of departments and their functions to boost the operational capacity for the sections to speed up the development of the long-term care system; in addition, the responsible units of the Department of Health and Department of Social Welfare hold a regular coordination meeting of long-term care heads and a business coordination meeting every month. 12 meetings were held in 2018.



▲ 社衛政長照首長聯繫會議
Social Health Policy Leader Communication Conference



第二節 建構完善長照服務體系

一、臺北市府衛生局長期照護科下設立「臺北市長期照顧管理中心」為長照服務諮詢單一窗口，整合各局處共同建構全人長期照護網絡，由衛生局提供醫療專業照護服務資源、社會局提供生活照顧服務資源；另配合衛生福利部建置之「1966 長照服務專線」，由臺北市長期照顧管理中心人員接聽及服務，提供市民快速、方便地取得長照服務資訊，享有前 5 分鐘免通話費；且透過專線互

動式語音選單，即能為居住在不同縣市的親友或長輩申請當地的長照服務。只要是符合申請資格的市民，長期照顧管理中心將派照顧管理專員到家進行評估，依需求提供量身訂做的長照服務；民國 107 年臺北市失能人口數為 55,958 人，使用長期照顧服務人數為 14,421 人，涵蓋率達 25.77%。

二、臺北市持續提供原長照 1.0 服務，包括居家式服務、社區式服務、機構住宿式服務、家庭照顧者支持服務據點、銜接在宅醫療、居家安寧等，另為接軌中央長期照顧十年計畫 2.0，擴大服務對象含 50 歲以上失智及 49 歲以下身障者，服務項目由 8 項擴至 17 項，並共同擴充長照 2.0 服務量能作為包含：

（一）強化長期照顧管理中心功能：

為統整建立地方政府長期照顧管理制度，整合社政、衛政資源，並依據臺北市長期照顧管理中心服務區域，提供受理民眾需求評估及連結、輸送長期照顧服務之單一窗口，以提供整合性、多元化之長期照顧服務。

1. 分站管理制度：

依據臺北市長期照顧需求人數、土地面積、人口密度及服務之可近性，分為東、西、南一、南二、北、中區等 6 分站，由照管督導負責服務站管理，包含站內照顧管理專員評估一致性建立、長照服務資源之核定、照顧計畫合適性之審查、社區鄰里關懷與活動舉辦、發展並經營長照服務資源網絡等。

2. 照管中心督導會報及區域性聯繫會議：

每月由衛生局簡任技正定期主持，透由溝通、協調各項長期照顧業務的推動及整合個案管理流程，並每月召開區域性聯繫會議，結合各區社區資源及服務單位，以維繫長期照顧服務推展之夥伴關係與默契，提升轉介成功率；另提供交流平台以利各種資源團體之溝通與資源運用經驗之分享，掌握各區域在地資源現況，以建構完整且在地化的長期照顧服務網絡。



▲ 長期照顧管理中心
Long-Term Care Management Center



Section 2 Establishment of a Complete Long-Term Care System

1. The “Taipei City Long-Term Care Management Center” is established under the Long-Term Care Division of the Department and serves as the one-stop service for consultation about long-term care service. It integrates all the department to build a long-term care network for the people needing the service. The Department provides professional medical care resources and the Department of Social Welfare provides the resources needed for care in daily life. To make use of the “1966 Long-Term Care Hotline”, the personnel of the Taipei City Long-Term Care Management Center answer the phone to provide citizens with available long-term care information rapidly. The call is toll-free for the first 5 minutes. Especially, the interactive voice menu of the hotline can help relatives, friends or elders living in other cities or counties apply for local long-term care service. For all the qualified citizens, the Taipei City Long-Term Care Management Center will send a caregiver specialist to make home assessment in order to provide customized long-term care service to meet their requirements. In 2018, there were 55,958 citizens with disabilities in Taipei and 14,421 of them used long-term care service with a coverage rate of 25.77%.
2. The original Long-Term Care Service 1.0, including home care service, community care service, residential long-term care service, home caregiver supporting stations, and sequential home health care and palliative care, remains available in Taipei City. This long-term care plan is connected to the 10-year Long-Term Care Plan 2.0 of the central government with a broadened applicability to cover the citizens more than 50 years old and suffering from dementia and the citizens with disabilities and less than 49 years old. The service items of the Long-Term Care 2.0 are increased from 8 to 17 and more measures are taken:

(1) Enhanced function of the Long-Term Care Management Center:

To establish a long-term care management system for local government on a unified basis, integrate the social welfare and healthcare resource, In addition, the hospital has also established single-contact point for the delivery of long-term care service by assessing and connecting the needs of citizens who have requested for assistance in accordance to the areas of long-term care management centers' service locations across Taipei City in order to provide integrated and diversified long-term care services.

A. Station-Based Management Mechanism:

Based on factors such as the number of citizens requiring long-term care in Taipei City, land area, population density and accessibility of services, the Department has established 6 stations of long-term care management: east, west, south 1, south 2, north and central area. These stations operate under the supervision of long-term care management center, such as ensuring consistent assessment by management personnel across the stations, approval of relevant resources for long-term care, review of care plan suitability, implementation of community care and organization of relevant activities, development and management of long-term care service resource network and so forth.

B. Long-Term Care Management

Center supervision meeting and regional contact meetings: Each month, the Department's senior technical specialist will chair the supervision meeting to facilitate communication and coordination of various promotions for long-term care affairs and integration of case management procedures. In addition, regional contact meetings are convened on a monthly basis to connect resources and service units at each district to maintain partnership and team work among member units in the promotion of long-term care services to increase referral success rate. The Department also provides platform of exchange for different resource organizations to communicate and share their experiences on resource utilization so as to attain adequate grasp on the current status of resource availability in each district so as to construct a comprehensive and localized network of long-term care services.

3. 照管人力留任及招募：

為增進臺北市照管人力留任，臺北市政府衛生局訂定「臺北市政府衛生局照顧管理專員－曾任國內長照服務年資採計提敘薪點補充規定」，並制定公出彈性上下班內控管理機制，減少照顧管理人員訪案通勤往來耗費之時間，提升工作之效率；另辦理隨招隨考制度加速人員招募、運用多元管道廣發招募訊息及持續向中央爭取開放擔任照專資格條件及相關照顧工作經驗適度調降。截至 107 年 12 月底照管人員共 78 名（進用率 83.87%）。

4. 建立單一窗口：

以長期照顧管理中心為單一服務窗口，評估市民長期照顧服務需求，協助連結各項服務資源，提供民眾具時效性、個別性的長照服務，截至 107 年 12 月電話諮詢量計 6 萬 5,310 人次，新收案量計 1 萬 1,038 人。

5. 照顧管理人員訓練及輔導：

為強化照顧管理專員專業知能，訂定新進照顧管理專員實務訓練輔導機制，為期 7 週輔導期，由各區督導安排輔導流程，並由資深照管專員輔導新進照顧管理專員學習，及辦理照顧管理人員在職教育訓練課程，為提升照顧管理人員專業知能，臺北市政府訂定每位照專每年至少參加 4 次在職教育訓練課程，共辦理 9 場次，542 人次參與，以確保照顧品質。

（二）精進出院準備：

由照顧管理專員或出院準備友善醫院專業人員在醫院進行個案需求評估，並連結服務資源，使病患在出院返家後立即獲得妥適的長期照顧服務；臺北市政府衛生局將全市 36 家醫院納入收案服務合作對象，共有 17 家通過出院準備友善醫院認證，107 年轉介案量共計 1,926 案，實際到院評估完成長照服務連結共計 1,863 案；藉由縮短民眾出院後至接受長照服務的等候時間，建立出院返家後長照服務能立即銜接制度，提升長期照顧業務執行效能，及早在失能前提供服務，降低醫療、長照之社會與家庭負擔，以達優質照顧，無縫接軌管理服务之目的。



▲ 出院準備計畫
Discharge Preparation Plan



C. Human resource retention and recruitment for long-term care management:

To facilitate human source retention for long-term care service management in the Department of Health, Taipei City Government has established the “Supplementary Regulations for the Assumption of Service Seniority and Calculation of Salary for Caregiver Specialist of the Department of Health, Taipei City Government” and the flextime internal control mechanism to reduce the time wasted on commute between visits made by care management personnel and improve their productivity. In addition, the Department has also adopted the “immediate recruitment upon the passing of examination” to speed up the process of personnel recruitment, utilized diverse channels to announcement recruitment information apart from petitioning the central authority to relax relevant requirements on the qualifications for professional caregivers and adjustment in the fitness requirement for relevant work experiences. As of December 2018, the Department has hired a total of 78 care management personnel (with a recruitment rate of 83.87%).

D. Creation of One-Stop Service:

With the long-term care management center as the one-stop service, the Department has evaluated citizens' need for long-term care services and assisted with the connection to relevant service resources in order to provide the general public long-term care services that are timely and individualized. As of the end of December 2018, a 65,310 calls of inquiries were received, with 11,038 new cases accepted and registered.

E. Care management personnel training and guidance:

To strengthen the professional competence of care management personnel, the Department has established its “New Care Management Personnel Practical Training and Guidance Mechanism”, which involves a 7-week counseling and mentorship period for each district to supervise and arrange the process of guidance, with senior care management personnel to assist newcomers in relevant learning on top of On-the-job training. To ensure that all care management personnel are equipped with the necessary competence, Taipei City Government has made it mandatory for all care management personnel to take part in no less than 4 On-the-job trainings each year. The Department has held a total of 9 training sessions for 542 participants as a way to ensure their work quality.

(2) Improved discharge planning:

The caregiver specialist or the professional person of the discharge planning-friendly hospital assesses the requirements of the case in the hospital and connects to the service resources. This can ensure the patient receives appropriate long-term care service right after leaving the hospital and returning home. The Department takes 36 hospitals in Taipei City as the partner to accept the cases and 17 of them passes the certification for discharge planning-friendly hospitals. There were 1,926 referral cases in 2018 and 1863 cases actually finished the assessment in the hospital and were connected to the long-term care service. A system ensuring direct connection to long-term care service after the patient leaves the hospital and returns home is established by shortening the waiting time to improve the implementation effectiveness of the long-term care service, provide the service as early as possible before the patient becomes disabled, and relieve the burden of medical and long-term care on the society and family. These are helpful for provision of premium care and seamless connection to management service.



（三）整合失智照護：

1. 失智症早期診斷早期治療：

- （1）建立失智症篩檢之社區網絡模式：結合臺北市十二區健康服務中心、各級醫療院所及社會局老人服務中心等單位，運用各項活動進行失智症社區篩檢。
- （2）轉介疑似失智症個案至合約醫院：為提供充裕、完整及優質可近性高的失智症醫療服務，臺北市政府衛生局與 12 家醫院簽約合作，針對設籍臺北市 65 歲以上民衆提供失智症檢查、診斷及醫療服務；民國 107 年共計服務 1 萬 5,819 人，AD8 < 2 計 1 萬 2,094 人、AD8 > 2（疑似個案）計 3,740 人，確診個案計 1,844 人。
- （3）失智症宣導活動：透過臺北市十二區健康服務中心、老人服務中心、社區關懷據點等進行失智症相關宣導及諮詢服務，增進民衆對失智症的瞭解並能去污名化，臺北市政府衛生局設立「臺北市政府失智症服務網」，可讓市民查詢失智症資訊、照護指引、服務資源、衛教資料以及相關活動等資訊；107 年辦理失智症宣導活動共計 662 場次，計 5 萬 9,353 人次參與。

2. 適當的失智症照護及支持服務

- （1）失智症個案管理關懷服務：針對失智症確診個案，以個案家庭為中心，依罹病程度或需求，發展失智症個案管理分級照護模式，以主動關懷瞭解個案需求及問題，進行關懷訪視。民國 107 年與 4 家醫院（含臺北市立聯合醫院 2 個院區）合作，6 個醫療單位共收案計 375 人，門診諮詢計 823 人次、電話訪視計 1,202 人次及居家訪視關懷計 486 人次。
- （2）失智症照護課程及專業人員教育訓練：辦理失智照護相關人才培訓，期能減少照顧者壓力與負擔，並提升患者與家屬生活品質與受到良善照護資源，以加強臺北市市民對失智症自我照顧之技巧，並提升臺北市相關專業人員、家庭照顧者照護知識、技能與資源運用；107 年失智症居家照護課程共辦理 40 場，計 1,213 人次參與，以及專業人員培訓課程 10 場，計 718 人次參與。
- （3）失智症長者樂齡成長團體活動：結合臺北市健康服務中心及委託民間單位等辦理樂齡成長團體活動，透過懷舊、藝術創作、戶外休閒活動等課程，幫助長者獲得自我認同，持續運用現存的能力，也讓主要照顧者有短暫的喘息機會。107 年委由 6 家廠商於十二行政區共舉辦樂齡成長課程共 144 場，共計 3,029 人次參加，其中個案共 1,660 人次，家屬及照顧者共 1,369 人次。



▲ 失智症樂齡成長團體課程
Dementia Ageing Group Course



(3) Integration of Dementia Care

A. Early Diagnosis and Early Treatment of Dementia

- (A) Establishment of a community dementia screening network mode: Community dementia screening is conducted by combining the health centers in the 12 districts of Taipei City, hospitals and clinics at different levels, and the senior service centers of the Department of Social Welfare to organize different events.
- (B) Referral of suspected dementia cases to contracted hospitals: To provide adequate, complete, premium and accessible medical service for dementia patients, the Department entered into contracts with 12 hospitals to provide inspection, diagnosis and treatment services for the citizens who are over 65 years old and have a household register in Taipei City. A total of 15,819 citizens received the serviced in 2018. 12,094 of them have AD8 <2, 3,740 of them have AD8 > 2 (suspected cases), and 1,844 citizens were confirmed cases.
- (C) Dementia promotion: Education and consultation services of dementia were provided through the health center in the 12 districts, senior service centers, and community senior care stations to help citizens understand dementia for its destigmatization. The Department sets up the “Taipei City Government Dementia Service Network” and the citizens can find dementia information, care guidelines, service resources, health education information, and information about related activities here. 662 dissemination activities with 59,353 participants were held in 2018.

B. Appropriate Dementia Care and Support Services

- (A) Management and Care Service of dementia cases: A dementia case management and grading care model was developed for confirmed dementia cases. The model was designed based on the severity and demand of the patients with their family as the center for the purpose to care for the cases, understand their demand, and conduct care visit. By cooperating with 4 hospitals (including 2 branches of Taipei City Hospital), 6 medical units accepted 375 cases, 823 cases sought for clinic consultation, telephone visits on 1,202 cases and home care visits on 486 cases were conducted in 2018.
- (B) Dementia care courses and educational training of professional personnel: Training of dementia care personnel was arranged to relieve the stress and burden of the caregiver, improve the living quality of the patient and family member, and receive adequate care resources. These can help the citizens of Taipei City enhance their self-care skills of dementia patients, improve the knowledge, skills and resource applications of the professional personnel and home caregivers in Taipei City. A total of 40 dementia home care courses and a total of 10 professional personnel training courses were held in 2018. The former attracted 1,213 participants while the latter attracted 718 participants.
- (C) Group activities for the elderly with dementia: Happy Growth group activities were organized by cooperating with the health centers of Taipei City and commissioning the institutions in the private sector. Courses on good old days, artistic creations, and outdoor recreational activities were provided to help the elderly find their self-identity and make use of their existing capability. The caregiver could take a rest at this moment. 6 providers were commissioned to provide 144 sessions of Happy Growth courses in the 12 administrative districts in 2018. 3,029 citizens participated in these activities. 1,660 of them were patients and 1369 of them were family members and caregivers.



- (4) 提供預防走失之愛的手鍊及指紋捺印申請服務、建立社區失智服務志工團隊、互助家庭等失智症照護活動，107年共計提供 1,084 條愛的手鍊，完成指紋捺印者共計 638 人。

3. 民國 107 年運用原已建置的失智照護網絡配合衛生福利部失智照護服務規劃重點，設置失智共同照護中心與失智社區服務據點，提升照護範疇及服務量能，普及失智照護資源，讓失智症個案及家屬可就近獲得服務資源；臺北

市由臺北市立聯合醫院和平婦幼院區及臺北榮民總醫院承辦失智共同照護中心，提供失智者社區式個案管理機制及照顧者支持性服務，建立可近、可用及有品質之失智症社區整合照護服務模式；設立 11 處失智社區服務據點，提供個案及照顧者認知促進、緩和失智服務、家屬支持團體及家屬照顧課程等服務。

(四) 強化社區復健：

配合中央長期照顧十年計畫 2.0，為強化長照服務量能，以及發展在地化服務輸送體系，積極結合既有長期照顧服務提供單位升級服務功能，並鼓勵民間服務單位投入辦理長期照顧服務，規劃於臺北市十二區健康服務中心、老人服務中心、長照 2.0 之 B、C 據點、集合式住宅（如國宅）及社區關懷據點 5.0 等處所，建構社區整體照顧服務體系，提供復健服務及民衆具有近便性的服務，使失能、失智長者走入社區，參與社區復健計畫，預防及減緩失能惡化，延緩入住機構時間，以落實在地老化之政策目標；民國 106 年延續社區復健站服務，經長期照顧管理中心核准為使用長期照顧相關服務給付對象後，由簽約單位之職能治療師或物理治療師駐點服務，共計服務 1,101 場次，2,806 人，9,015 人次。；配合衛生福利部推動「預防及延緩失能照護計畫」，透過 9 家特約單位，建立 25 個服務據點，開辦 32 期課程，服務人數 466 人；107 年建立 108 個服務據點，開辦 202 期課程，服務人數 2,308 人。



▲ 失智共照中心提供失智者及家屬諮商服務
Dementia Joint-Care Center Patient and Family Consultation Services

(D) Application for The Wrist Ring of Love and fingerprinting service to prevent losing the way: Dementia service volunteer teams and mutual help families are formed in communities to provide dementia care services. In 2018, the Department distributed a total of 1,084 Bracelets of Love, with 638 cases finished their fingerprinting.

C. The Dementia Shared Care Center and the community dementia service stations were established in 2018 using the existing dementia care network with reference to the planning guidelines of dementia care services formulated by the Ministry of Health and Welfare. The purpose of these establishments is to broaden the scope of the care and the capacity of the service, make the care resources available universally, and help the patients and their family members acquire service resources in the neighborhood. The Heping Fuyou Branch of Taipei City Hospital is responsible for the Dementia Shared Care Center in Taipei City. In addition to a community-based case management mechanism, it provides supportive services that caregivers need and build an accessible and available community integrated dementia care model of high quality. 11 community dementia service stations were set up to improve the knowledge of the patients and their caregivers, provide dementia alleviation service, conduct care visits, and give home care courses.



▲ 社區復健
Community Rehabilitation

D. Enhancement of Community Rehabilitation:

To execute the 10-year Long-Term Care Plan 2.0 of the central government, enhance the long-term care capacity, and develop local service delivery systems, existing long-term service providers are integrated to upgrade the service function. In addition to encouraging the companies in the private section to provide long-term care services, a plan is made to build an integrated community care service system in the health centers in the 12 districts, senior service centers, Long-Term Care 2.0 B and C points, collective houses (e.g. public housing), and community care points 5.0. The system is built to provide rehabilitation service and other services accessible and available to the people, and help the elderly with disabilities or dementia accept the community and participate in the community rehabilitation program to prevent the disability from becoming worse and relieve the condition, postpone the hospitalization, and achieve the goal of aging in place policy. The community service stations worked continuously in 2017. When a patient is approved by the Long-Term Care Management Center as a case to receive the long-term care service, the occupational or physical therapist of the contracted unit will provide on-site services. These services were provided or 2,806 citizens 1,101 times, and 9,015 people received the services; The Department promoted the “Disability (Dementia) Prevention and Postponement Project” as directed by the Ministry of Health and Welfare; 25 service points were set up through 9 contracted units and courses were offered over in 32 sessions to serve a total of 466 citizens. In 2018, the number of service points were increased to 108, with 202 sessions of courses offered to serve up to 2,308 citizens.



第三節 擴大照顧服務量能

一、培訓服務人力：

自民國 106 年《長期照護服務法》上路之後，長期照護服務需求大幅增加，因此臺北市政府持續培訓足夠的儲備人力，擴大各項服務人力訓練及提升長照服務人員知能，以提升長照服務量能。

（一）長照醫事人員培訓：

針對醫事人員持續辦理 Level I 培訓課程，培育具備長照知能與熱

誠之長照醫事人員，亦提供醫事人員跨縣市參與，在有限之財政資源下，創造服務加乘效益；民國 107 年辦理 4 梯次長照醫事人員 Level I 課程，參訓 248 人，完訓人數 224 人，完訓率為 90.3%。

（二）照顧服務員培訓：

為培訓照顧服務人力投入長期照顧市場，組成跨局處合作團隊；相關教育訓練由臺北市政府勞動局主辦，由衛生局協助「照顧服務員」訓練計畫專業課程審核及醫院照顧服務員訓練與管理，社會局主責居家之照顧服務人力教育訓練及日照、老人福利機構之照顧服務員訓練及管理，勞動局負責外籍看護工、個人看護者與照顧服務員勞動條件等非醫事人員之長照訓練與技能檢定，另配合勞動部鼓勵失業、待業或在職勞工參加照顧服務員訓練，以促進中高齡、婦女及一般失業者就業，補助縣市民間機構（社團）辦理「照顧服務員」訓練，以因應多元化長期照顧人力需求；民國 107 年辦理 31 場照顧服務員培訓課程，參訓人數 924 人，合格人數 904 人，合格率 98%。



▲ 長期照護醫事人力培訓課程
Long-Term Care Medical Manpower Training Course

Section 3 Extension of the Service Capacity

1. Training of service personnel:

The demand for long-term care services has grown substantially since the Long-Term Care Service Act took effect in 2017. Hence, Taipei City Government has been ensuring sufficient reserve manpower on an ongoing basis by extending the training of service personnel in different fields and improving the knowledge of long-term care workers to broaden the capacity of long-term care service.



▲ 照顧管理員訓練
Care Administrator Training

(1) Training of medical personnel for long-term care:

The Level I course is provided for medical personnel to ensure their long-term care knowledge and enthusiasm. Cross-city (county) training is available for medical personnel to take in the hope to create a synergistic effect with limited financial resources. The Level 1 course was provided in 4 phases in 2018. 248 persons take the course and 224 finished the training with a completion rate of 90.3%.

(2) Training of long-term care workers:

A cross-department team is formed to train care service workers and help them enter the long-term care market, with the Department of Labor being responsible for relevant training. The Department of Health gives assistance in the review of the professional courses as well as training and management of the care service workers in the hospital under the “Care Service Workers” training program. The Department of Social Welfare is responsible for the educational training of home care service workers, day care, training and management of care service workers in senior care institutes. The Department of Labor is responsible for long-term care training and skill evaluation of non-medical workers, such as foreign and personal caregivers, and the working condition of care service workers. To support the Ministry of Labor in the encouragement of labors who are out of work or waiting for a job and the labors at their posts to take training for care service workers and help middle-aged and elderly women and the unemployed to take up an occupation, subsidies are provided for the institutions (associations) in the private sector to arrange training for care service workers to meet the requirements for diversified long-term care workers. In 2018, a total of 31 care service worker trainings were offered for a total of 924 participants, with 904 passing the training at a passing rate of 98%.



二、建置長期照護服務設施：

規劃於臺北市北投區設置長照園區，將現行稻香市場拆除改建，規劃設置社區型長照設施，包括日照中心、小規模多機能、居家護理等；並於原秀山國小預定地，規劃結合北投區在地特色並加以整合與延伸其照顧模式，開發為臺北市具指標性之長期照護園區，以失智照護園區、中繼期復健照護園區、社區型長照園區、健康照護產業發展園區進行規劃；臺北市政府衛生局配合都市發展局，於信義區廣慈博愛園區規劃中繼期照護復健設施（中繼期復健中心、中繼期護理之家、中繼期住宅）及臺北市立聯合醫院院外門診部（信義門診部）；亦配合社會局，於萬隆東營區社會福利設施用地規劃社區復健中心。

第二章 提升民衆在地安老善終照護

第一節 建構都會型社區安寧照護模式

臺北市立聯合醫院每年約有 2,100 位病人於院內死亡，而居家護理個案中，每年有近 300 位病人死亡，其中僅 60 位病人於家中或機構內死亡，其餘 240 位病人死亡地點為醫院，而這些病人有六成以上為大於 65 歲以上的老人，在去世前，常反覆入院，舟車勞頓，或因未有充分準備，臨床上經常看到家屬因病人呼吸喘難受而焦慮不安，而在緊急狀況



▲ 社區安寧照護團隊居家訪視
Community Tranquil Care Team Home Visit

下，醫師又無法充分說明而進行急救插管，家屬慌亂不安，最後病人死亡，場面混亂，病人與家屬都無法生死兩相安。因此，民國 104 年臺北市立聯合醫院推展「社區安寧照護」，以建構無框架的愛，醫療團隊人員走出白色巨塔之安寧療護體系為基礎，成為「亞洲第一個以醫院／社區為基礎的醫療機構」為目標，讓有意願在家善終者，提供居家安寧，各院區、各科部、各病房安寧常規化，成為社區居家安寧推動典範，將這份愛的力量擴散至全臺灣，期能引領臺灣安寧常規化跳脫安寧病房的照護模式，團隊打破傳統醫療模式，走出白色巨塔，踏入社區，透過全人、全家、全程、全隊、全社區的五全照護，使病人及家屬能得到更好的生活品質，減少受苦，提供生命末期病人（包括癌症末期與八大非癌末期病人）身心靈的照護服務，達到病人得以善終之願景。

臺北市立聯合醫院全面啟動社區照護資源，由醫師、護理師、藥師、營養師、心理師、社工師、復健治療師及行政人員等各跨領域專業工作者組成的社區安寧團隊介入，提供個案症狀控制及舒適照護，使生命末期病人在人生中的最後一哩路，於自己熟悉的家裡在家人陪伴下，安全舒適、有尊嚴地安穩善終，落葉歸根。「社區安寧照護服務」自民國 104 年啟動至今，照護品質逐年提升，107 年照護人數 651 人，非癌比率達 59.68%；死亡人數 308 人中，在宅往生共 142 人，占 46.1%。



2. Setup of long-term care facilities:

A long-term care park is planned to be set up in Beitou District of Taipei City. The Daoxiang Market will be dismantled and rebuilt for this purpose. Community-based long-term care facilities, including daycare centers, multi functional small-scale centers and home nursing facilities, are to be built. The lot that was originally planned for Xiushan Elementary School will be integrated with the local features of the Beitou District and developed to a long-term care park with the existing care model. This park will be a iconic landmark of Taipei City. It will be planned with a dementia care park, an intermediate rehabilitation and care park, a community-based long-term care park, and a healthcare industry development park. By working with the Department of Urban Development, intermediate care and rehabilitation facilities (comprised of an intermediate rehabilitation center, an intermediate nursing home, and an intermediate residential area) and a external outpatient clinic (Xinyi Outpatient Department) of Taipei City Hospital are planned and will be located in the Guangci Charity Park, Xinyi District. By operating in coordination with the Department of Social Welfare, a community rehabilitation center is planned to be built in Wanlong Dongying District that was originally planned for construction of social welfare facilities.

Chapter 2 Improvement of Local Retirement Life Care and Natural Death

Section 1 Built a Metropolis Community Palliative Care Model

About 2,100 patients die in Taipei City Hospital every year, and about 300 patients of the home nursing cases die every year. Only 60 patients die at home or in the institution and the rest 240 patients die in the hospital. More than 60% of these patients are the old over 65. Before passing away, they often came to the hospital and were fatigued by such a journey. It is commonly seen in the practice that many family members, perhaps not prepared adequately, felt anxious when they saw the patient panting and feeling very uncomfortable. They might be in a flurry when the doctor conducted emergency intubation without full explanation beforehand. The patient breathed his/her last in chaos. Both the patient and family member could not die or live in peace. Therefore, Taipei City Hospital has promoted the "Community Palliative Care" since 2015. With the palliative care system of frame less love as the basis, the members of the medical team go out of the ivory tower with the goal of becoming "the first hospital/community based medical institution in Asia" to provide home palliative care for the patients who want to die in his/her bed at home. The palliative care is normalized in every branch, department and ward. It is a good example of community and home palliative care. The power of this frameless love will be spread to every corner of Taiwan in the hope to normalize the palliative care in Taiwan and go beyond the IPU care mode. The team breaks through the traditional medical approaches. It goes out of the ivory tower and enters the community to ensure better quality of life for the patients and their family members, relieve their sufferings through the 5 'W' Health Care of Whole Person, Whole Family, Whole Process, Whole Team, and Whole Community, provide the patients who are facing the end of their life with physical, mental, and spiritual care services, and make their wishes to die a natural death come true.

Taipei City Hospital makes all the community care resources available. A community palliative care team comprised of cross-discipline professions including doctors, register nurses, pharmacist, dietitian, psychiatrists, social workers, rehabilitation therapists, and administrative staff is involved to provide symptom control and comfort care services and help the patients who are facing the end of their life to walk the last mile of their journey and die safely, comfortably and with dignity in the company of their family at home. The "Community Palliative Care" was launched in 2015 and the service quality was getting better every year. 651 patients received the care in 2018 and 59.68% of them were not cancer patients. 142 (46.1%) of the 308 patients who die passed away at home.



第二節 厚植安寧專業人力，翻轉醫療文化

為讓末期評估、安寧理念、溝通關懷及同理心等文化深植人心，除持續辦理安寧相關教育訓練、繼續教育、座談會與分享會外，亦藉由擬真劇場，辦理社區安寧臨床技能演練，透過末期病人照護之臨床場景（由標準病人扮演病人及家屬），邀請各院區社區安寧照護服務團隊參與，透過角色扮演及主題討論方式進行雙向互動與回饋，以協助社區安寧臨床推動。另更於民國 105 年初成立社區安寧發展中心，期院內具有推動經驗者能藉由該中心平臺分享推動經驗、支援或輔佐需要協助者，以利聯合醫院長期推動社區安寧。

自民國 104 年起，臺北市立聯合醫院即辦理多場乙類安寧教育訓練，積極培育乙類安寧照護專業人力，並培養全院人員不分職類之安寧識能。104 年本院安寧照護人力（醫師、護理人員、社工人員、心理師）計 24 人，截至 107 年 12 月 31 日止，全院經中央健康保險署核備，具甲類安寧居家療護、乙類社區安寧照護職類人員（醫師、護理人員、社工人員、心理師）計 291 人，成長 1,112.5%。為培訓全院同仁安寧同理心，透過模擬末期病人照護之臨床場景的擬真教學，107 年辦理安寧擬真小劇場共辦理 11 場次，共計 239 人與會，讓參與夥伴一起瞭解安寧照護流程及內容與意義。

配合民國 105 年《病人自主權利法》之頒布，106 年起臺北市立聯合醫院新增預立醫療自主計畫，領先全國辦理「病人自主權利法（ACP）」課程培訓，宣導《病人自主權利法》，開辦種子教師課程，邀請院外推動本法專家學者進行一系列課程培訓，進而成為核心種子講師，未來不僅於院內各單位進行宣導，亦至院外各單位進行宣傳，課程安排 2.5 日（共計 21 小時），107 年 3 月開辦至 107 年 11 月份已辦理 7 場病人自主權利法核心講師培訓課程，依參訓人次共計 1,470 人次。

臺北市立聯合醫院積極與社區資源串連，推廣社區安寧照護服務，與臺北市衛政（如臺北市 12 區健康服務中心等）、社政（如老人服務中心、浩然敬老院、兆如老人安養護中心等）、民政（如里辦公室）、非營利組織（如大悲學苑等）、學校（如中山國中等）及其他縣市政府（如連江、嘉義、臺中、彰化、雲林、臺南、高雄、桃園）等，共同辦理超過百餘場的安寧宣導講座，並積極培訓志工，普及安寧識能。



▲ 乙類安寧教育訓練
Class B Tranquil Education Training



▲ 擬真教學－擬真小劇場
Simulation-Based Training--Simulation Theater



▲ 《病人自主權利法》訓練
“Patient Right to Autonomy Act” Training



Section 2 Strengthen Community Palliative Care Personnel and Transform Medical Culture

To root the end-stage assessment, hospice care concept, communication and care, and empathy deeply in our mind, in addition to palliation-related educational training, continuation education, seminars and sharing sessions, Taipei City Hospital organized clinical exercises of community palliative care through simulation in experimental theaters. The community palliative care teams from different hospitals were invited to the theater with a clinical end-stage care scenario (standardized patients playing the roles of patients and family members). Two-way interaction and feedback were conducted through role playing and theme-based discussion to facilitate promotion of the community clinical palliative care. A community palliative care development center was set up at the beginning of the year 2016, hoping that experienced personnel of the hospital can share their promotion experiences via this platform and give support or assistance to the personnel who need help so that Taipei City Hospital can promote community palliative care on a long-term basis.

Ever since 2015, Taipei City Hospital has organized multiple sessions of B-type palliative education and training in an effort to cultivate professional B-type palliative care human resources among all personnel at the hospital. In 2015, the hospital's team of palliative care (including doctors, registered nurses, social workers and psychiatrists) consisted of 24 members. As of December 31, 2018, the hospital's total number of A-type home palliative care and B-type community palliative care personnel (including doctors, registered nurses, social workers and psychiatrists) came to 291 members, with a growth of 1,112.5%. In 2018, 11 sessions of simulation theater performances were held in the form of a clinical end-stage care scenario to train all hospital employees to become more empathetic in their administration of palliative care. A total of 239 employees participated in the event to learn the processes, contents and meanings of palliative care.

In conjunction with the promulgation of the "Patient Right to Autonomy Act" in 2016, Taipei City Hospital added Advance Care Planning (ACP) in 2017 and organized the first training course on the "Patient Right to Autonomy Act" in Taiwan to promote the "Patient Right to Autonomy Act" and provided relevant training for seed trainers by inviting relevant experts and scholars that contributed to the promulgation of the law to host a series of training to help personnel become core seed trainers. These trainers will not only be responsible for relevant disseminations at various units in the hospital but also be assigned to engage in relevant promotions outside the hospital. The courses were designed to span 2.5 days (a total of 21 hours) and between March and November 2018, 7 sessions of training sessions were provided for a total of 1,470 participants.

Taipei City Hospital actively connects to the resources of the community and promotes community palliative care. It worked with the agencies of health care (e.g. Taipei City health centers in the 12 districts), social welfare (e.g. senior service centers, Taipei City Haoran Senior Citizens Home, and Taipei City Hang-An Seniors' Home Multiple Long-Term Care Services) and civil administration (e.g. neighborhood office), NGOs (e.g. Dabai School), schools (e.g. Zhongshan Junior High School), and other city and county governments (e.g. Lianjiang, Chiayi, Taichung, Changhua, Yunlin, Tainan, Kaohsiung, and Taoyuan) to hold more than 100 sessions of palliative care promotion seminars, train volunteers, and make the knowledge of palliative care more popular.

第八篇 衛生 統計



8

Health Statistics





第八篇 衛生統計

第一章 人口概觀

第一節 人口數及零歲平均餘命

依據戶籍登記，民國 107 年底臺北市人口為 266 萬 8,572 人，占全國總人口 2,358 萬 8,932 人的 11.3%。

臺北市於民國 56 年改制為直轄市，57 年 7 月 1 日將近郊內湖、南港、木柵、景美、士林、北投等鄉鎮劃入市域，致該年底人口數驟增為 160 萬 4,543 人。其後逐年增加，至 79 年底人口為 271 萬 9,659 人，達臺北市登記人口數之高峰，22 年增加 69.5%；自 80 年起人口逐年略減，直至 87 年始略有成長，惟 90 年後跌多漲少，至 99 年起人口又漸回升，係因人口自然增加率（粗出生率減粗死亡率）及社會增加率（遷入率減遷出率）均呈正成長所致。惟 104 年起人口又逐年略減，107 年較 104 年減少 1.3%。

臺北市人口民國 107 年較 106 年減少 0.5%，粗出生率為 8.5‰、粗死亡率 6.7‰、自然增加率為 1.8‰。104 至 106 年臺北市民平均壽命為 83.6 歲，男性為 80.8 歲，女性為 86.3 歲，較 106 年全國國民平均 80.4 歲，男性 77.3 歲，女性 83.7 歲為高。

■ 表 7 臺北市人口概況與平均壽命

年別	年底人口數 (人)	粗出生率 (‰)	粗死亡率 (‰)	自然增加率 (‰)	平均壽命（歲）(1) （零歲平均餘命）	
					男	女
97 年	2,622,923	7.88	5.94	1.94	79.70	84.38
98 年	2,607,428	7.42	5.84	1.58	79.86	84.53
99 年	2,618,772	7.09	5.89	1.20	80.06	84.81
100 年	2,650,968	9.54	6.07	3.47	80.18	85.25
101 年	2,673,226	11.08	6.23	4.85	80.00	85.33
102 年	2,686,516	9.97	6.11	3.86	80.18	85.63
103 年	2,702,315	10.77	6.38	4.40	80.33	85.89
104 年	2,704,810	10.72	6.33	4.39	80.64	86.25
105 年	2,695,704	10.37	6.66	3.71	80.54	86.18
106 年	2,683,257	9.31	6.49	2.82	80.82	86.29
107 年	2,668,572	8.54	6.69	1.85

資料來源：臺北市府民政局、主計處、內政部。

附註：(1) 配合內政部縣市資料發布以 3 年合併人口資料編算，例如臺北市 106 年資料係以 104 ~ 106 年人口數計算。



Part 8 Health Statistics

Chapter 1 The Population

Section 1 Population and Life Expectancy at Birth

According to the household registration data, the population of Taipei City was 2,668,572 individuals at the end of 2018, which was 11.3% of Taiwan's total population of 23,588,932 people.

Taipei became a national municipality in 1967. On July 1, 1968, the townships of neighboring Neihu, Nangang, Muzha, Jingmei, Shilin and Beitou were included into the City. This change caused the City's population to rise suddenly to 1,604,543 individuals. The population has kept growing since then. By 1990, the total number of registered residents in Taipei City grew to a peak of 2,719,659 people which was a 69.50% growth in 22 years. Since 1991, however, the population started to decline, with a slight growth in 1998. However, the population continued to decrease since 2001. By 2010, the trend was reversed to assume a slight growth due to natural population increases (crude birth rate minus crude death rate) and positive social growth (immigration minus emigration). Due to the gradual decline in population starting from 2015, the numbers in 2018 fell by 1.3% compared to that of 2015.

When compared to those of 2017, Taipei City suffered a 0.5% population decrease in 2018, with 8.5‰ crude birth rate, 6.7‰ crude death rate, and 1.8‰ natural increase rate. Between 2015 and 2017, the average life expectancy of Taipei City citizens is 83.6 (Male: 80.8 and Female: 86.3), which is higher than the 2017 national life expectancy of 80.4 (Male: 77.3 and Female: 83.7).

Table 7 Population and Life Expectancy in Taipei City

Year	Year-end population (persons)	Crude Birth Rate (‰)	Crude Death Rate (‰)	Natural Increase Rate (‰)	Life Expectancy at Birth (years) (1)	
					Male	Female
2008	2,622,923	7.88	5.94	1.94	79.70	84.38
2009	2,607,428	7.42	5.84	1.58	79.86	84.53
2010	2,618,772	7.09	5.89	1.20	80.06	84.81
2011	2,650,968	9.54	6.07	3.47	80.18	85.25
2012	2,673,226	11.08	6.23	4.85	80.00	85.33
2013	2,686,516	9.97	6.11	3.86	80.18	85.63
2014	2,702,315	10.77	6.38	4.40	80.33	85.89
2015	2,704,810	10.72	6.33	4.39	80.64	86.25
2016	2,695,704	10.37	6.66	3.71	80.54	86.18
2017	2,683,257	9.31	6.49	2.82	80.82	86.29
2018	2,668,572	8.54	6.69	1.85

Source: Department of Civil Affairs, Taipei City Government and Department of Budget, Accounting, and Statistics; Ministry of the Interior (MOI).

Notes: (1) The statistics was obtained from the data on counties and cities released by the MOI, and was calculated by combining population data from across 3 years. For example, the 2017 data for Taipei City were based upon population data from 2015 to 2017.



第二節 人口結構

民國 107 年底臺北市男性人口 127 萬 3,375 人，占全市人口 47.7%，女性人口 139 萬 5,197 人，占全市人口 52.3%，男女性比例（指男性人口對百位女性人口的比例，即男／百女）為 91.3，性比例呈逐年下降走勢，係女性人口增加率高於男性所致。

若以年齡結構觀之，幼年人口（14 歲以下）36 萬 3,657 人，占臺北市總人口數的 13.6%；具生產能力人口（15 至 64 歲）為 184 萬 6,280 人，占 69.2%，老年人口（65 歲以上）為 45 萬 8,635 人，占 17.2%。

臺北市 65 歲以上老年人口占全市人口比率，自民國 81 年以後即超過 7%，進入聯合國定義之高齡化社會，後續呈逐年增加，至 103 年底老年人口已超過 14%，如將臺灣 22 縣市老年人口比率由高至低排序，107 年底臺北市排名第 3 位。臺北市幼年人口占全市人口比率，從 57 年底幼年人口占率 38.6%，一路逐年下降，於 104 年底首度低於老年人口比率，107 年底二者差距達 3.6 個百分點。

■ 表 8 臺北市人口指標

年底別	人口數 (千人)	人口結構 (%)				人口指標 (%)		
		未滿 15 歲	15-64 歲	65 歲以上	扶養比	扶幼比	扶老比	老化指數
97 年底	2,623	15.56	72.13	12.31	38.65	21.58	17.07	79.13
98 年底	2,607	15.10	72.31	12.60	38.30	20.88	17.42	83.43
99 年底	2,619	14.65	72.67	12.67	37.61	20.17	17.44	86.48
100 年底	2,651	14.45	72.80	12.76	37.37	19.84	17.53	88.31
101 年底	2,673	14.33	72.63	13.04	37.69	19.73	17.96	91.00
102 年底	2,687	14.28	72.22	13.50	38.46	19.77	18.69	94.53
103 年底	2,702	14.17	71.75	14.08	39.37	19.74	19.62	99.41
104 年底	2,705	13.95	71.29	14.76	40.28	19.57	20.70	105.76
105 年底	2,696	13.92	70.54	15.55	41.77	19.73	22.04	111.73
106 年底	2,683	13.78	69.85	16.37	43.17	19.73	23.43	118.74
107 年底	2,669	13.63	69.19	17.19	44.54	19.70	24.84	126.12

資料來源：臺北市府民政局、主計處、內政部。



Section 2 Population Structure

In 2018, there were 1,273,375 males (47.7% of the total population in Taipei City) and 1,395,197 females (52.3%) in Taipei City. The sex ratio (proportion of the male population per 100 of the female population) was 91.3. The sex ratio has been following a declining trend as the number of females grew more than that of males.

In terms of age, young people (those below 14 years of age) accounted for 363,657 individuals (13.6%), working age people (15 to 64 years of age) accounted for 1,846,280 (69.2%), while the elderly (65 years or more) accounted for 458,635 (17.2%).

Since 1992, the elderly (more than 65 years of age) made up more than 7% of Taipei's population. This meant that the city was an aging society according to definitions stipulated by the United Nations. This proportion has continued to grow since then, and by the end of 2014, the proportion of the elderly has exceeded 14%. If the 22 counties and cities of Taiwan were ranked according to the proportion of elderly in descending order, Taipei City would be ranked at the 3rd place at the end of 2018. In terms of the ratio of young people in Taipei City out of the city's entire population, the number fell steadily over the years starting from 1968 at 38.6% and for the first time fell below that of the ratio of old people in Taipei City in 2015. By the end of 2018, the gap between the two populations came to be as significant as 3.6%.

Table 8 Population Indicators of Taipei City

End of Year	Population (1,000 persons)	Population Structure (%)				Population Indicator (%)		
		Under 15 years of age	15 to 64 years of age	Above 65 years of age	Dependency ratio	Child dependency ratio	Aged dependency ratio	Aging index
2008	2,623	15.56	72.13	12.31	38.65	21.58	17.07	79.13
2009	2,607	15.10	72.31	12.60	38.30	20.88	17.42	83.43
2010	2,619	14.65	72.67	12.67	37.61	20.17	17.44	86.48
2011	2,651	14.45	72.80	12.76	37.37	19.84	17.53	88.31
2012	2,673	14.33	72.63	13.04	37.69	19.73	17.96	91.00
2013	2,687	14.28	72.22	13.50	38.46	19.77	18.69	94.53
2014	2,702	14.17	71.75	14.08	39.37	19.74	19.62	99.41
2015	2,705	13.95	71.29	14.76	40.28	19.57	20.70	105.76
2016	2,696	13.92	70.54	15.55	41.77	19.73	22.04	111.73
2017	2,683	13.78	69.85	16.37	43.17	19.73	23.43	118.74
2018	2,669	13.63	69.19	17.19	44.54	19.70	24.84	126.12

Source: Department of Civil Affairs, Taipei City Government and Department of Budget, Accounting, and Statistics; Ministry of the Interior (MOI).



表 9 臺北市兩性人口及性比例

年底別	人口數（千人）				性比例 （男 / 百女）
	男性	年增率（%）	女性	年增率（%）	
97 年底	1,271	-0.52	1,352	0.02	94.01
98 年底	1,260	-0.83	1,347	-0.37	93.58
99 年底	1,263	0.17	1,356	0.69	93.09
100 年底	1,276	1.09	1,375	1.36	92.85
101 年底	1,285	0.71	1,388	0.96	92.61
102 年底	1,290	0.36	1,397	0.63	92.37
103 年底	1,296	0.44	1,407	0.72	92.11
104 年底	1,295	-0.01	1,409	0.19	91.92
105 年底	1,290	-0.46	1,406	-0.22	91.70
106 年底	1,282	-0.59	1,401	-0.35	91.48
107 年底	1,273	-0.67	1,395	-0.44	91.27

資料來源：臺北市府民政局。

附註：人口數為戶籍登記資料，且不包括外僑人口。

圖 5 臺北市人口年齡結構圖

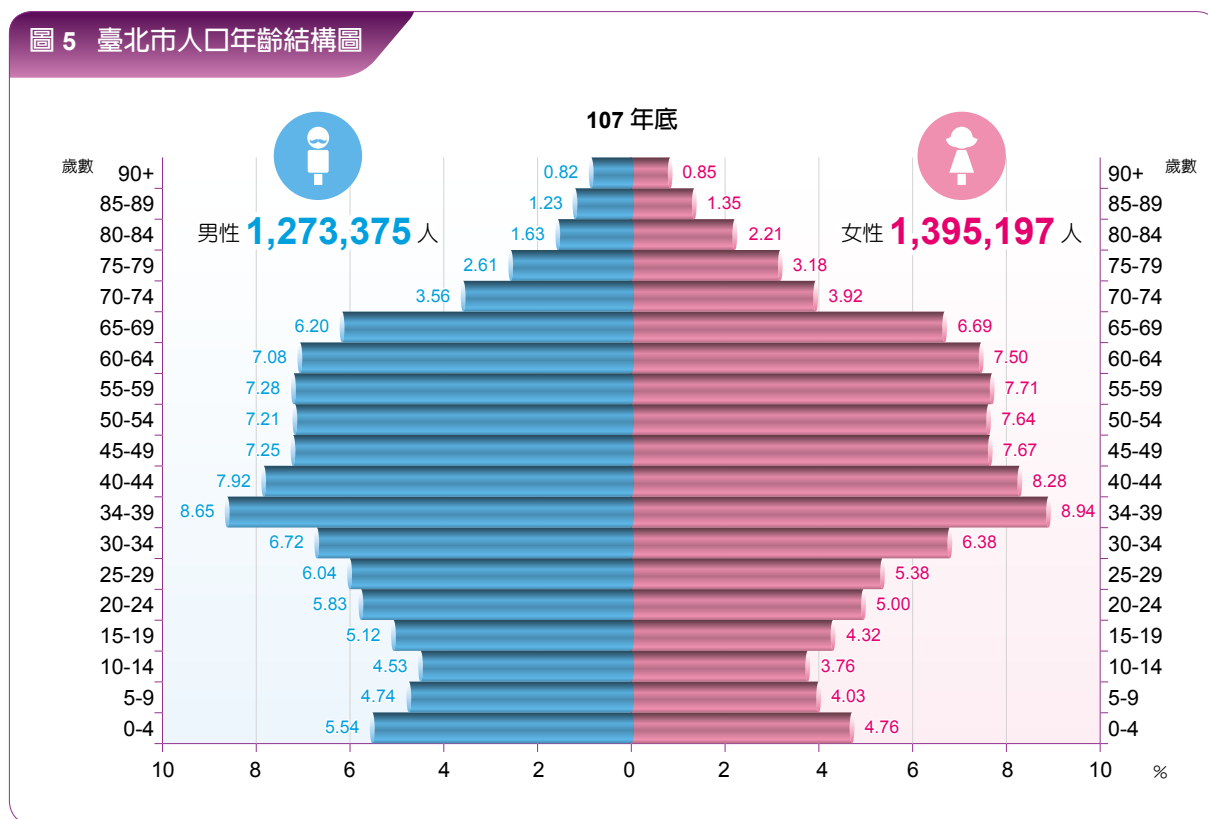




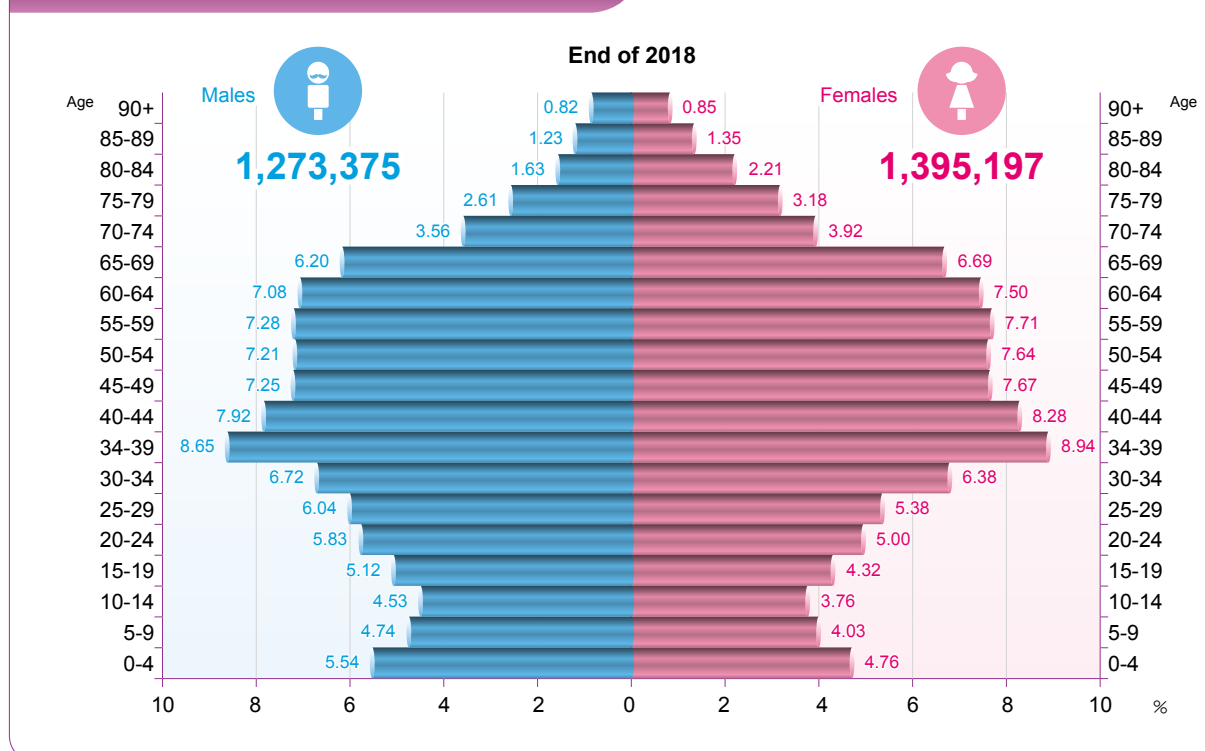
Table 9 Population by Gender and Sex Ratio in Taipei

End of Year	Population (1,000 persons)				Sex ratio (Males / 100 Male Females)
	Male	Annual growth rate (%)	Female	Annual growth rate (%)	
2008	1,271	-0.52	1,352	0.02	94.01
2009	1,260	-0.83	1,347	-0.37	93.58
2010	1,263	0.17	1,356	0.69	93.09
2011	1,276	1.09	1,375	1.36	92.85
2012	1,285	0.71	1,388	0.96	92.61
2013	1,290	0.36	1,397	0.63	92.37
2014	1,296	0.44	1,407	0.72	92.11
2015	1,295	-0.01	1,409	0.19	91.92
2016	1,290	-0.46	1,406	-0.22	91.70
2017	1,282	-0.59	1,401	-0.35	91.48
2018	1,273	-0.67	1,395	-0.44	91.27

Source: Department of Civil Affairs, Taipei City Government.

Notes: The population is based on household registration data and does not include foreign residents in the city.

Figure 5 The demographic structure of Taipei city





第二章 醫政統計

第一節 醫療院所數

臺北市醫療院所自民國 62 年底以來持續增加，85 年底家數為 2,701 家，並開始逐年略減，90 年底家數位 2,633 家，又呈增加趨勢，106 年底計有 3,578 家，其中醫院 36 家，診所 3,542 家。106 年底臺北市平均每一醫療院所服務人口數為 750 人，低於全國的 1,042 人；每萬人口所擁有的院所家數為 13.3 家，高於全國的 9.6 家。

表 10 臺北市醫療院所數

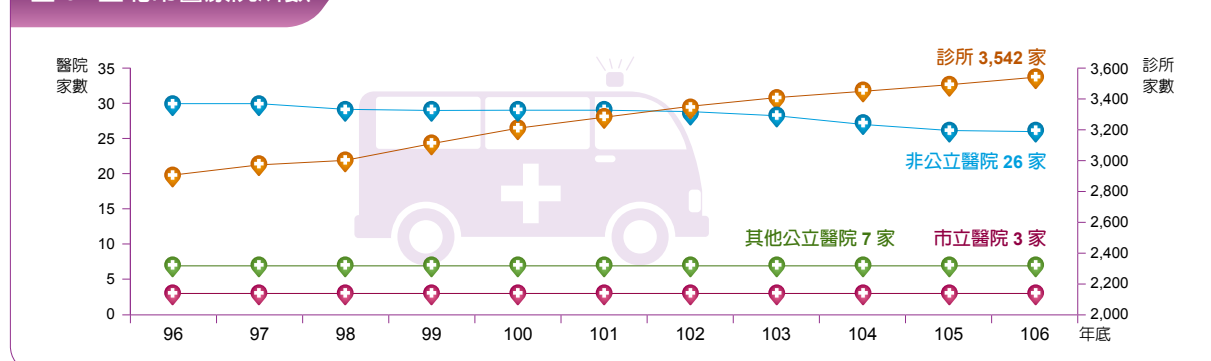
單位：家

年底別	合計	醫院				診所			
		小計	市立	其他公立	非公立	小計	市立	其他公立	非公立
96 年底	2,946	40	3	7	30	2,906	14	14	2,878
97 年底	3,010	40	3	7	30	2,970	14	15	2,941
98 年底	3,045	39	3	7	29	3,006	14	15	2,977
99 年底	3,147	39	3	7	29	3,108	14	15	3,079
100 年底	3,253	39	3	7	29	3,214	14	14	3,186
101 年底	3,321	39	3	7	29	3,282	14	13	3,255
102 年底	3,381	39	3	7	29	3,342	14	12	3,316
103 年底	3,450	38	3	7	28	3,412	15	13	3,384
104 年底	3,489	37	3	7	27	3,452	16	12	3,424
105 年底	3,526	36	3	7	26	3,490	17	12	3,461
106 年底	3,578	36	3	7	26	3,542	17	11	3,514

資料來源：衛生福利部。

附註：94 年 1 月起臺北市 10 家市立醫療院所整合為 1 家市立聯合醫院。

圖 6 臺北市醫療院所數





Chapter 2 Medical Affairs Statistics

Section 1 Number of Hospitals and Clinics

Since 1973, the number of medical care institutions in Taipei City assumed continuous growth until the end of 1996 when there were 2,701 hospitals and clinics. This figure then started to decrease slightly and reached 2,633 hospitals and clinics at the end of 2001. After this time, the number of hospitals and clinics rebounded again and continued to grow, reaching 3,578 (of which, 36 were hospitals and 3,542 were clinics) at the end of 2017. At the end of 2017, each medical care institution in Taipei serviced an average of 750 individuals, which was lower than the national average of 1042 individuals. This was equivalent to 13.3 medical care institutions per 10,000 people, which was higher than the national average of 9.6.

Table 10 Number of clinics and hospitals in Taipei City

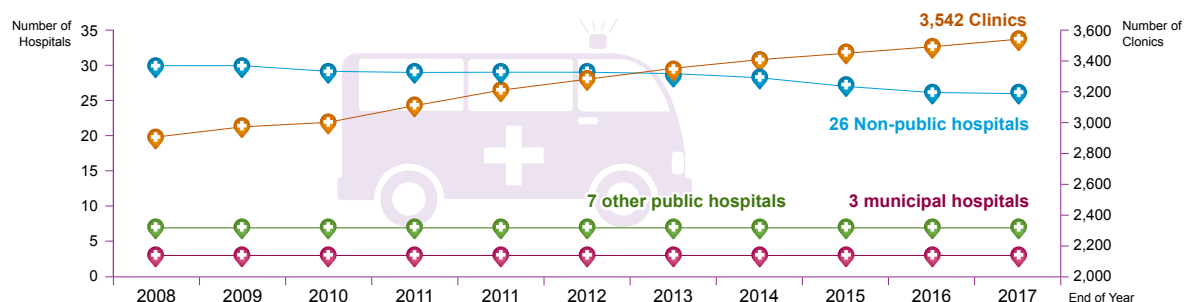
Unit: Institutions

End of Year	Total	Hospitals				Clinics			
		Subtotal	Municipal	Other Public	Non-Public	Subtotal	Municipal	Other Public	Non-Public
2007	2,946	40	3	7	30	2,906	14	14	2,878
2008	3,010	40	3	7	30	2,970	14	15	2,941
2009	3,045	39	3	7	29	3,006	14	15	2,977
2010	3,147	39	3	7	29	3,108	14	15	3,079
2011	3,253	39	3	7	29	3,214	14	14	3,186
2012	3,321	39	3	7	29	3,282	14	13	3,255
2013	3,381	39	3	7	29	3,342	14	12	3,316
2014	3,450	38	3	7	28	3,412	15	13	3,384
2015	3,489	37	3	7	27	3,452	16	12	3,424
2016	3,526	36	3	7	26	3,490	17	12	3,461
2017	3,578	36	3	7	26	3,542	17	11	3,514

Source: Ministry of Health and Welfare.

Notes: Since January 2005, the 10 municipal hospitals of Taipei City were merged to form a single institution under the name of Taipei City Hospital (TPECH).

Figure 6 Number of clinics and hospitals in Taipei city





第二節 病床數

民國 106 年底臺北市醫療院所病床數共 2 萬 5,229 床，其中公立院所病床數 1 萬 2,489 床，占總病床數 49.5%，非公立院所病床數 1 萬 2,740 床占總病床數 50.5%；依病床性質別區分為，一般病床數 1 萬 4,496 床（占 57.5%），特殊病床數 10,733 床（占 42.5%）。平均每萬人口病床數 94.0 床，高於全國的 69.8 床，每一病床服務 106.4 人，低於全國的 143.2 人。

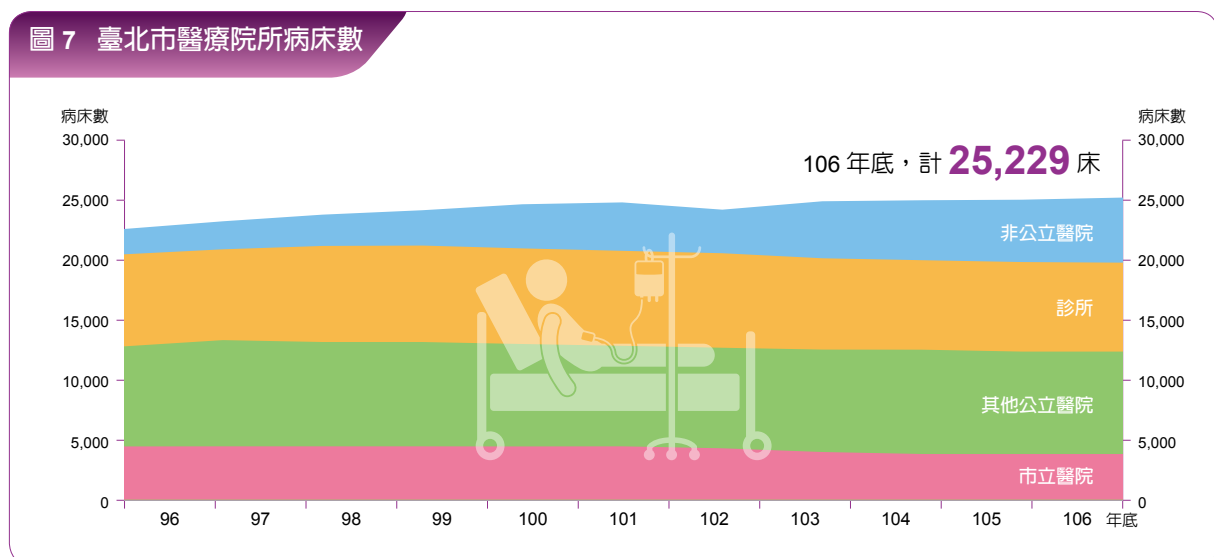
表 11 臺北市醫療院所病床數

單位：家、床、人

年底別	家數			病床數			平均每萬人口 病床數	每一病床 服務人口數
	合計	公立	非公立	合計	公立	非公立		
96 年底	2,946	38	2,908	22,478	12,888	9,590	85.49	116.97
97 年底	3,010	39	2,971	23,262	13,293	9,969	88.69	112.76
98 年底	3,045	39	3,006	23,781	13,263	10,518	91.20	109.64
99 年底	3,147	39	3,108	24,220	13,244	10,976	92.49	108.12
100 年底	3,253	38	3,215	24,666	13,054	11,612	93.05	107.47
101 年底	3,321	37	3,284	24,817	12,850	11,967	92.84	107.72
102 年底	3,381	36	3,345	24,241	12,786	11,455	90.23	110.83
103 年底	3,450	38	3,412	24,899	12,614	12,285	92.14	108.53
104 年底	3,489	37	3,452	25,045	12,635	12,410	92.59	108.00
105 年底	3,526	36	3,490	25,076	12,509	12,567	93.02	107.50
106 年底	3,578	36	3,542	25,229	12,489	12,740	94.02	106.36

資料來源：衛生福利部。

圖 7 臺北市醫療院所病床數





Section 2 Number of Hospital Beds

At the end of 2017, there were a total of 25,229 hospital beds in medical care institutions of Taipei City. Of these, 12,489 hospital beds (49.5% of total) were in public medical care institutions while 12,740 hospital beds (50.5%) were in non-public medical care institutions. When classified by bed types, there were 14,496 general hospital beds (57.5%) and 10,733 special hospital beds (42.5%). There was an average of 94.0 hospital beds per 10,000 persons, which was higher than the national average of 69.8 hospital beds. In Taipei, each hospital beds served 106.4 persons which was lower than the national average of 143.2 persons.

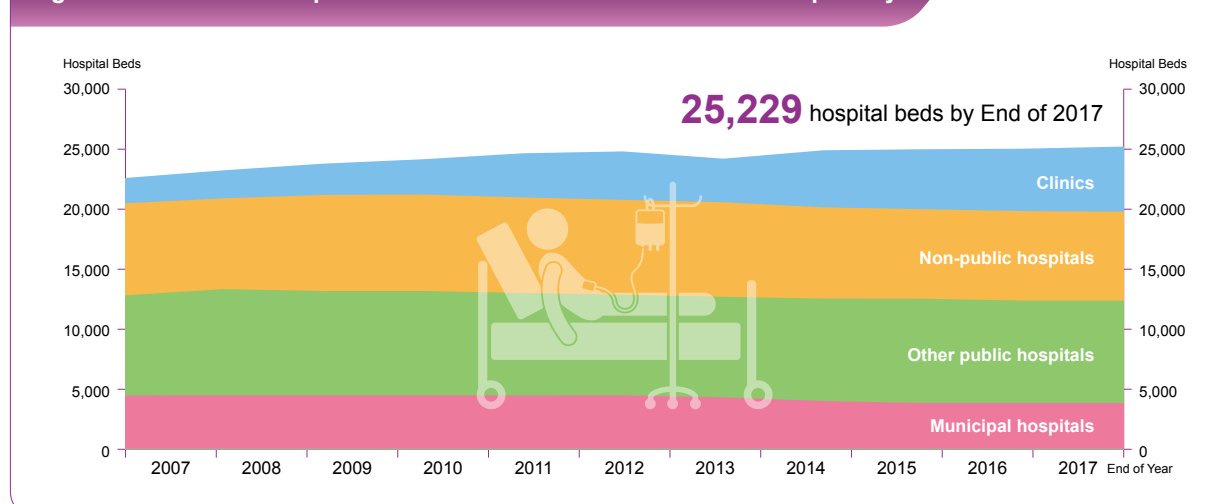
Table 11 Number of hospital beds of medical care institutions in Taipei City

Unit: Institutions, hospital beds, persons

End of Year	Number of medical care institutions			Number of hospital beds			Average number of hospital beds per 10,000 persons	Average number of persons served per hospital bed
	Total	Public	Non-Public	Total	Public	Non-Public		
2007	2,946	38	2,908	22,478	12,888	9,590	85.49	116.97
2008	3,010	39	2,971	23,262	13,293	9,969	88.69	112.76
2009	3,045	39	3,006	23,781	13,263	10,518	91.20	109.64
2010	3,147	39	3,108	24,220	13,244	10,976	92.49	108.12
2011	3,253	38	3,215	24,666	13,054	11,612	93.05	107.47
2012	3,321	37	3,284	24,817	12,850	11,967	92.84	107.72
2013	3,381	36	3,345	24,241	12,786	11,455	90.23	110.83
2014	3,450	38	3,412	24,899	12,614	12,285	92.14	108.53
2015	3,489	37	3,452	25,045	12,635	12,410	92.59	108.00
2016	3,526	36	3,490	25,076	12,509	12,567	93.02	107.50
2017	3,578	36	3,542	25,229	12,489	12,740	94.02	106.36

Source: Ministry of Health and Welfare.

Figure 7 Number of hospital beds in medical care institutions of Taipei City





第三節 醫院服務量

近十年臺北市醫院平均每日門診、急診人次等醫療服務量走勢大致呈振盪成長，106 年門、急診平均每日就診人次分別為 8 萬 6,871 人次、2,806 人次，平均住院日數 7.0 日，病床占床率為 75.7%。

表 12 臺北市醫院醫療服務量

年別	平均每日人次					平均住院日數	剖腹產率%	占床率%
	門診	急診	血液透析	門診手術	住院手術			
96 年	75,684	2,911	1,781	571	580	8.42	34.45	72.23
97 年	75,008	2,838	1,755	531	587	8.33	33.37	70.29
98 年	79,060	3,157	1,756	521	634	8.04	33.83	69.92
99 年	80,139	3,099	1,779	639	578	8.08	34.89	71.66
100 年	80,471	3,206	1,889	662	594	8.06	34.14	74.10
101 年	84,650	3,152	1,956	709	617	7.89	33.89	74.28
102 年	84,668	2,904	1,973	717	607	7.89	35.11	73.50
103 年	84,776	2,964	1,965	706	645	7.80	33.85	73.61
104 年	83,766	2,992	1,878	642	547	7.76	34.05	74.86
105 年	85,307	3,072	2,087	701	602	7.73	33.13	75.60
106 年	86,871	2,806	2,118	759	629	7.02	34.16	75.69

資料來源：衛生福利部。

第四節 醫事人員

民國 106 年底臺北市醫療機構及醫事機構各類執業醫事人員計 5 萬 4,356 人，依各類人員統計，護產人員（含護理師、護士、助產師、士）占 50.4% 最多，醫師（含中、西、牙醫師）占 25.9% 次之，藥事人員（含藥師、藥劑生）占 10.4%，醫檢人員（含醫事檢驗師、生、士、醫事放射師、士）占 6.6%，其他醫事人員（含鑲牙生、營養師、物理治療師、生職能治療師、生、臨床心理師、諮商心理師、呼吸治療師、語言治療師、聽力師）占 6.7%。平均每萬人擁有執業醫事人員數計有 202.6 人，其中醫師 52.4 人（含中、西、牙醫師），護產人員 102.0 人。

護產人員占
50.4% 最多





Section 3 Utilization Rate of Hospitals

The average number of cases served each day in outpatient and emergency treatment departments of Taipei City hospitals has shown unstable trend in the last decade. In 2017, the number of cases served each day in outpatient and emergency treatment departments were 86,871 and 2,806, respectively. Average length of stay was 7.0 days while hospital bed occupancy rate was 75.7%.

Table 12 Utilization Rate of Hospitals in Taipei City

Year	Average number of visits per day					Average length of stay	Cesarean section rate %	Hospital bed Occupancy rate %
	Outpatient rate % services	Emergency treatment	Hemodialysis	Outpatient operation	Inpatient operation			
2007	75,684	2,911	1,781	571	580	8.42	34.45	72.23
2008	75,008	2,838	1,755	531	587	8.33	33.37	70.29
2009	79,060	3,157	1,756	521	634	8.04	33.83	69.92
2010	80,139	3,099	1,779	639	578	8.08	34.89	71.66
2011	80,471	3,206	1,889	662	594	8.06	34.14	74.10
2012	84,650	3,152	1,956	709	617	7.89	33.89	74.28
2013	84,668	2,904	1,973	717	607	7.89	35.11	73.50
2014	84,776	2,964	1,965	706	645	7.80	33.85	73.61
2015	83,766	2,992	1,878	642	547	7.76	34.05	74.86
2016	85,307	3,072	2,087	701	602	7.73	33.13	75.60
2017	86,871	2,806	2,118	759	629	7.02	34.16	75.69

Source: Ministry of Health and Welfare.

Section 4 Medical Personnel

At the end of 2017, there were a total of 54,356 licensed and registered medical personnel working in the medical care institutions of Taipei City. Of these, the largest number were nursing staff (including registered professional nurses, registered nurses, registered professional midwives and midwives) who accounted for 50.4% of the total number of medical personnel, followed by doctors (including physicians, Traditional Chinese Medicine physicians and dentists) at 25.9%, pharmaceutical personnel (pharmacists and pharmacist assistants) at 10.4%, medical technicians (including medical technologists, technicians and lab assistants as well as radiologists and technicians) at 6.6%, and other medical personnel (including dental technicians, dietitians, physical therapists and technicians, occupational therapists and technicians, clinical psychologists, counseling psychologists, respiratory therapists, speech therapists and audiologists) at 6.7%. On average, there were 202.6 licensed medical personnel per 10,000 persons in Taipei City. Of these, 52.4 were doctors (including physicians, Traditional Chinese Medicine physicians and dentists) and 102.0 were nursing staff.



表 13 臺北市醫療機構及醫事機構各類執業醫事人員數

單位：人

年底別	合計	西醫師	中醫師	牙醫師	藥師	藥劑生	醫事檢驗師、生	醫事放射師、士	護理師及護士	助產師、士	其他
96 年底	40,769	7,682	706	2,401	4,006	796	1,731	940	20,919	13	1,575
97 年底	42,447	7,877	730	2,452	4,163	781	1,759	1,002	21,904	11	1,768
98 年底	43,883	7,993	773	2,518	4,313	765	1,839	1,039	22,721	4	1,918
99 年底	44,869	8,245	771	2,604	4,370	751	1,891	1,078	22,964	5	2,190
100 年底	46,324	8,553	793	2,687	4,587	717	1,933	1,125	23,517	4	2,408
101 年底	47,344	8,811	818	2,755	4,681	709	1,951	1,185	23,846	5	2,583
102 年底	48,143	8,869	843	2,843	4,721	690	2,027	1,201	24,136	7	2,806
103 年底	49,164	9,040	869	2,932	4,827	668	2,111	1,257	24,409	13	3,038
104 年底	50,914	9,299	861	3,028	4,931	652	2,126	1,279	25,467	14	3,257
105 年底	52,287	9,446	878	3,098	4,983	632	2,150	1,315	26,270	21	3,494
106 年底	54,356	9,897	941	3,218	5,068	599	2,184	1,380	27,381	31	3,657

資料來源：衛生福利部。

表 14 臺北市平均每萬人擁有執業醫事人員數

單位：人

年底別	合計	西醫師	中醫師	牙醫師	藥師	藥劑生	醫事檢驗師、生	醫事放射師、士	護理師及護士	助產師、士	其他
96 年底	155.06	29.22	2.69	9.13	15.24	3.03	6.58	3.58	79.56	0.05	5.99
97 年底	161.83	30.03	2.78	9.35	15.87	2.98	6.71	3.82	83.51	0.04	6.74
98 年底	168.30	30.65	2.96	9.66	16.54	2.93	7.05	3.98	87.14	0.02	7.36
99 年底	171.34	31.48	2.94	9.94	16.69	2.87	7.22	4.12	87.69	0.02	8.36
100 年底	174.74	32.26	2.99	10.14	17.30	2.70	7.29	4.24	88.71	0.02	9.08
101 年底	177.10	32.96	3.06	10.31	17.51	2.65	7.30	4.43	89.20	0.02	9.66
102 年底	179.20	33.01	3.14	10.58	17.57	2.57	7.55	4.47	89.84	0.03	10.44
103 年底	181.93	33.45	3.22	10.85	17.86	2.47	7.81	4.65	90.33	0.05	11.24
104 年底	188.24	34.38	3.18	11.19	18.23	2.41	7.86	4.73	94.15	0.05	12.04
105 年底	193.96	35.04	3.26	11.49	18.48	2.34	7.98	4.88	97.45	0.08	12.96
106 年底	202.60	36.88	3.51	11.99	18.89	2.23	8.14	5.14	102.04	0.12	13.63

資料來源：衛生福利部。



Table 13 Number of Registered Medical Personnel by Medical Service Category in Medical Institutions of Taipei City

Unit: Individuals

End of Year	Total	Physicians	Traditional Chinese Medicine Physicians	Dentists	Pharmacists	Pharmacist assistants	Medical technologist and assistant	Radiologist and assistant	Registered professional nurse and registered nurse	Registered professional midwives and midwives	Other
2007	40,769	7,682	706	2,401	4,006	796	1,731	940	20,919	13	1,575
2008	42,447	7,877	730	2,452	4,163	781	1,759	1,002	21,904	11	1,768
2009	43,883	7,993	773	2,518	4,313	765	1,839	1,039	22,721	4	1,918
2010	44,869	8,245	771	2,604	4,370	751	1,891	1,078	22,964	5	2,190
2011	46,324	8,553	793	2,687	4,587	717	1,933	1,125	23,517	4	2,408
2012	47,344	8,811	818	2,755	4,681	709	1,951	1,185	23,846	5	2,583
2013	48,143	8,869	843	2,843	4,721	690	2,027	1,201	24,136	7	2,806
2014	49,164	9,040	869	2,932	4,827	668	2,111	1,257	24,409	13	3,038
2015	50,914	9,299	861	3,028	4,931	652	2,126	1,279	25,467	14	3,257
2016	52,287	9,446	878	3,098	4,983	632	2,150	1,315	26,270	21	3,494
2017	54,356	9,897	941	3,218	5,068	599	2,184	1,380	27,381	31	3,657

Source: Ministry of Health and Welfare.

Table 14 Number of Registered Medical Personnel per 10,000 Persons in Taipei City

Unit: Individuals

End of Year	Total	Physicians	Traditional Chinese Medicine Physicians	Dentists	Pharmacists	Pharmacist assistants	Medical technologist and assistant	Radiologist and assistant	Registered professional nurse and registered nurse	Registered professional midwives and midwives	Other
2007	155.06	29.22	2.69	9.13	15.24	3.03	6.58	3.58	79.56	0.05	5.99
2008	161.83	30.03	2.78	9.35	15.87	2.98	6.71	3.82	83.51	0.04	6.74
2009	168.30	30.65	2.96	9.66	16.54	2.93	7.05	3.98	87.14	0.02	7.36
2010	171.34	31.48	2.94	9.94	16.69	2.87	7.22	4.12	87.69	0.02	8.36
2011	174.74	32.26	2.99	10.14	17.30	2.70	7.29	4.24	88.71	0.02	9.08
2012	177.10	32.96	3.06	10.31	17.51	2.65	7.30	4.43	89.20	0.02	9.66
2013	179.20	33.01	3.14	10.58	17.57	2.57	7.55	4.47	89.84	0.03	10.44
2014	181.93	33.45	3.22	10.85	17.86	2.47	7.81	4.65	90.33	0.05	11.24
2015	188.24	34.38	3.18	11.19	18.23	2.41	7.86	4.73	94.15	0.05	12.04
2016	193.96	35.04	3.26	11.49	18.48	2.34	7.98	4.88	97.45	0.08	12.96
2017	202.60	36.88	3.51	11.99	18.89	2.23	8.14	5.14	102.04	0.12	13.63

Source: Ministry of Health and Welfare.



第三章 死因統計

第一節 十大死因及變化

臺北市民國 106 年惡性腫瘤仍位居臺北市民主要死亡原因之冠，而心臟疾病（高血壓性疾病除外）、腦血管疾病在 80 年以後分別位居市民主要死因之第二或第三順位，惟 105 年與 106 年已連續兩年，肺炎超越腦血管疾病成為第三。106 年臺北市死亡人數 1 萬 7,634 人，死亡率為每十萬人口 655.7 人，較全國死亡率 729.6 人低，其中惡性腫瘤死亡率為每十萬人口 188.2 人，死亡者占有死亡人數 28.7%，心臟疾病（高血壓性疾病除外）死亡率 102.3 人，占 15.6%，肺炎死亡率 52.9 人，占 8.1%；其餘死因依序為腦血管疾病、糖尿病、腎炎、腎病症候群及腎病變、慢性下呼吸道疾病、敗血症、事故傷害、高血壓性疾病。

兩性十大主要死因前三位皆為惡性腫瘤、心臟疾病、肺炎及腦血管疾病，其餘死因的部分，男性與全體主要死因不同之處，男性僅自殺進入十大；女性則多出血管性及未明示之癱瘓症（事故傷害未入十大）居多。

表 15 ICD-10 臺北市主要死亡原因

民國 106 年

單位：人、%、人 / 每十萬人口

順位	死亡原因	死亡人數	死亡百分比	每十萬人口死亡率		
				計	男	女
	所有死亡原因	17,634	100.00	655.67	775.76	545.67
1	惡性腫瘤	5,062	28.71	188.21	215.76	162.99
2	心臟疾病（高血壓性疾病除外）	2,750	15.59	102.25	125.92	80.57
3	肺炎	1,423	8.07	52.91	67.51	39.54
4	腦血管疾病	1,197	6.79	44.51	54.06	35.76
5	糖尿病	728	4.13	27.07	26.52	27.57
6	腎炎、腎病症候群及腎病變	592	3.36	22.01	22.48	21.58
7	慢性下呼吸道疾病	590	3.35	21.94	33.60	11.26
8	敗血症	463	2.63	17.22	21.62	13.18
9	事故傷害	443	2.51	16.47	23.57	9.97
10	高血壓性疾病	369	2.09	13.72	14.78	12.75
	其他	4,017	22.78	149.36	186.23	128.44

附註：

- 97 年起死因統計資料配合衛生福利部改採國際疾病分類第十版（ICD-10）。
- 臺北市 106 年年中人口數，計 2,689,481 人，男性 1,285,714 人，女性 1,403,767 人。
- 本表順位以兩性合計死亡率排序。非何杰金氏淋巴瘤。



Chapter 3 Causes of Death

Section 1 Ten Leading Causes of Death and Changes

In 2017, malignant neoplasm remained the leading cause of death of residents living in Taipei City, followed by cardiac diseases (not including hypertensive diseases) and cerebro-vascular diseases which have been occupying the 2nd and 3rd places for the leading causes of death respectively since 1991. For two consecutive years in 2016 and 2017, pneumonia overtook cerebro-vascular disease as the 3rd leading cause of death. In 2017, there were a total of 17,634 deaths in Taipei City for a death rate of 655.7 per 100,000 persons, which was lower than the national average of 729.6. Of these, 188.2 (28.7% of total deaths) could be attributed to malignant neoplasm, 102.3 (15.6%) to cardiac diseases (not including hypertensive diseases), and 52.9 (8.1%) to pneumonia. Other leading causes of death were cerebro-vascular diseases, diabetes mellitus, nephritis, nephrotic syndrome and nephrosis, chronic lower respiratory diseases, septicemia, accidents and hypertensive diseases.

The top leading causes of death for citizens of both sexes have been malignant tumor, cardiac diseases, pneumonia and cerebro-vascular diseases. For males, the sole difference in the other the leading causes of death has been the inclusion of suicide. For females, hemorrhagic illnesses and unspecific dementia were added to the list. (Accident is not listed as one of the top ten leading causes of death).

Table 15 Leading Causes of Death in Taipei City by ICD-10 Classification

2017

Unit: Persons, %, Persons/100,000 persons

Rank	Cause of death	Number of deaths	% of deaths	Mortality per 100,000 persons		
				Total	Male	Female
	All causes	17,634	100.00	655.67	775.76	545.67
1	Malignant tumor	5,062	28.71	188.21	215.76	162.99
2	Cardiac diseases (except hypertensive diseases)	2,750	15.59	102.25	125.92	80.57
3	Pneumonia	1,423	8.07	52.91	67.51	39.54
4	Cerebro-vascular disease	1,197	6.79	44.51	54.06	35.76
5	Diabetes mellitus	728	4.13	27.07	26.52	27.57
6	Chronic lower respiratory diseases	592	3.36	22.01	22.48	21.58
7	Nephritis, nephrotic syndrome and nephrosis	590	3.35	21.94	33.60	11.26
8	Septicemia	463	2.63	17.22	21.62	13.18
9	Accidents and adverse effects	443	2.51	16.47	23.57	9.97
10	Hypertensive diseases	369	2.09	13.72	14.78	12.75
	Other	4,017	22.78	149.36	186.23	128.44

Note:

- Since 2008, statistics on mortality were based upon the International Statistical Classification of Diseases and Related Health Problems, 10th revision (ICD-10) adopted by the Ministry of Health and Welfare (MOHW).
- Based on the population of Taipei City in 2017 which was 2,689,481, with 1,285,714 males and 1,403,767 females.
- The order of the causes of death is arranged according to the combined death rates of both sexes.



第二節 十大癌症

臺北市民國 106 年癌症死亡人數 5,062 人，死亡率為每十萬人口 188.2 人，較全國死亡率 203.9 人略低；其中男性死亡人數 2,774 人，死亡率為每十萬男性人口 215.8 人，女性死亡人數 2,288 人，死亡率為每十萬女性人口 163.0 人。

十大癌症死亡原因之順位依序為氣管、支氣管和肺癌、結腸、直腸和肛門癌、肝和肝內膽管癌、女性乳房癌、前列腺（攝護腺）癌、胰臟癌、胃癌、卵巢癌、口腔癌、子宮頸及部位未明示子宮癌。另兩性與全體十大癌症死因不同之處，男性有食道癌、膀胱癌及非何杰金氏淋巴瘤進入十大，女性則多出非何杰金氏淋巴瘤及子宮體癌（口腔癌未入十大）。

表 16 ICD-10 臺北市主要癌症死亡原因

民國 106 年

單位：人、%、人／每十萬人口

順位	死亡原因	死亡人數	死亡百分比	每十萬人口死亡率		
				計	男	女
	所有癌症死亡原因	5,062	100.00	188.21	215.76	162.99
1	氣管、支氣管和肺癌	1,034	20.43	38.45	47.06	30.56
2	結腸、直腸和肛門癌	670	13.24	24.91	27.07	22.94
3	肝和肝內膽管癌	658	13.00	24.47	33.99	15.74
4	女性乳房癌 ⁽¹⁾	323	6.38	23.01	-	23.01
5	前列腺（攝護腺）癌 ⁽²⁾	177	3.50	13.77	13.77	-
6	胰臟癌	294	5.81	10.93	11.82	10.12
7	胃癌	278	5.49	10.34	14.00	6.98
8	卵巢癌 ⁽¹⁾	89	1.76	6.34	-	6.34
9	口腔癌	166	3.28	6.17	11.36	1.42
10	子宮頸及部位未明示子宮癌 ⁽¹⁾	76	1.50	5.41	-	5.41
	其他	1,297	25.62	48.22	36.87	33.34

附註：

- 97 年起死因統計資料配合衛生福利部改採國際疾病分類第十版（ICD-10）。
- 臺北市 106 年年中人口數，計 2,689,481 人，男性 1,285,714 人，女性 1,403,767 人。
- 本表順位以兩性合計死亡率排序。
 - 為女性死亡率（每十萬女性人口死亡數）。
 - 為男性死亡率（每十萬男性人口死亡數）。



Section 2 Ten Leading Cancers

In 2017, a total of 5,062 deaths in Taipei City could be attributed to cancer for a death rate of 188.2 per 100,000 persons which was slightly lower compared to the national average of 203.9. Of all cancer deaths, 2,774 were males for a death rate of 215.8 per 100,000 males, while 2,288 were females for a death rate of 163.0 per 100,000 females.

The ten leading causes of cancer deaths, in descending order, were: cancer of the trachea, bronchus and lung; cancer of the colon, rectum and anus; cancer of the liver and intra-hepatic bile ducts; cancer of female breasts; cancer of prostate; cancer of the stomach; cancer of the pancreas; cancer of the oral cavity; cancer of the ovaries; and non-Hodgkin's lymphoma. The ten leading causes of cancer deaths differed by gender as well. For males, esophageal cancer, bladder cancer and non-Hodgkin lymphoma had made to the top 10 causes of death; for females, non-Hodgkin lymphoma and corpus uteri cancer were the new entries (oral cancer fell out of the top 10).

Table 16 Ten Leading Causes of Cancer Death in Taipei City by ICD-10 Classification

2017

Unit: Persons, %, Persons/100,000 persons

Rank	Cause of death	Number of deaths	% of deaths	Mortality per 100,000 persons		
				Total	Male	Female
	All causes of cancer death	5,062	100.00	188.21	215.76	162.99
1	Cancer of the trachea, bronchus and lungs	1,034	20.43	38.45	47.06	30.56
2	Cancer of the colon, rectum and anus	670	13.24	24.91	27.07	22.94
3	Cancer of the liver and intrahepatic bile ducts	658	13.00	24.47	33.99	15.74
4	Cancer of the female breasts ⁽¹⁾	323	6.38	23.01	-	23.01
5	Cancer of the prostate ⁽²⁾	177	3.50	13.77	13.77	-
6	Cancer of the pancreas	294	5.81	10.93	11.82	10.12
7	Cancer of the pancreas	278	5.49	10.34	14.00	6.98
8	Cancer of the ovaries ⁽¹⁾	89	1.76	6.34	-	6.34
9	Cancer of the oral cavity	166	3.28	6.17	11.36	1.42
10	Cancers of cervix uteri and uterus, part unspecified ⁽¹⁾	76	1.50	5.41	-	5.41
	Other	1,297	25.62	48.22	36.87	33.34

Note:

1. Since 2008, statistics on mortality were based upon the International Statistical Classification of Diseases and Related Health Problems, 10th revision (ICD-10) adopted by the Ministry of Health and Welfare (MOHW).
2. Based on the population of Taipei City in 2017 which was 2,689,481, with 1,285,714 males and 1,403,767 females.
3. The order of the causes of death is arranged according to the combined death rates of both sexes.

(1) Death rate per 100,000 females.

(2) Death rate per 100,000 males.

附錄

臺北市政府
衛生局大事
紀要

Appendix

Chronology of Department of Health, Taipei City Government





附錄 臺北市政府衛生局大事紀要

月份	日期	內容說明
1 月	03	召開臺北市政府委託經營臺北市立醫院監督小組 106 年第 2 次會議。
	07	臺北市政府衛生局與臺北市藥師公會假天成飯店 TICC 世貿會館共同辦理「臺北市 106 年度藥師節慶祝大會第四屆績優藥事人員表揚大會」，由衛生局局長黃世傑出席致詞並頒獎。並召開記者會，臺北市市長柯文哲與澎湖縣副縣長林皆興簽訂「臺北澎湖家庭藥師合作計畫」合作意向書，由臺北市政府衛生局邀集臺北市立聯合醫院及臺北市藥師公會，共同跨海協助澎湖縣建構長期藥事照護模式。
	16	臺北市十二區健康服務中心獲頒衛生福利部國民健康署 106 年「高齡友善健康照護機構典範選拔」與「高齡友善健康照護創意提案徵選」7 項獎項，為全國唯一榮獲最多高齡友善健康照護獎項之縣市，並至臺北市政會議進行獻獎。
	22	臺北市政府衛生局發布「臺北市衛生局預告食安新政策 3 月西式外燴要報備、5 月推出食安微笑標章」新聞稿，預告 107 年食安新政策，3 月提供西式冷盤、壽司、沙拉、西點等餐點的外燴業者，應事先報備；5 月將加碼推出夜市專屬「食品安全微笑標章」，針對「食材溯源追蹤」、「人員衛生」、「製作環境衛生」及「病媒防治」等 4 大面向，設計符合夜市攤商之衛生評核標準，守護臺北市食品安全。
	25	因應流感疫情高峰，召開「因應流感疫情專家研商會議」與專家共同研商流感防治政策。
	29	臺北市政府衛生局發布「因應流感疫情應變整備臺北市衛生局與八大醫學中心提早啟動」新聞稿 1 篇，公告臺北市春節期間類流感特別門診開設資訊。
2 月	10	臺北市市長柯文哲進行一日社區醫師活動，訪視萬華區社區弱勢長者及失能病人。
3 月	13	臺北市政府衛生局於臺北市公務人員訓練處辦理「衛生稽查實務研習班（一）」兩梯次，3 月 13、14、22 及 26 日共計 82 人參與。
	17	臺北市政府衛生局假信義行人徒步區辦理食安週系列活動之「食安資訊 e 點通園遊會」宣導食安政策，並邀請府外單位擺設衛生福利部食品藥物管理署百貨資訊專區，臺北市政府教育局擺設 4 章 1Q，臺北市市場處擺設夜市專區等。
	20	臺北市政府衛生局透過臺北市政府社會局補助辦理社區照顧關懷據點實施計畫快速布點，臺北市政府衛生局將據點列冊輔導，透過據點自主報名及篩選供餐量大之 150 個據點，於 107 年度指派專人到點服務，輔導人員食品安全衛生觀念，讓共餐者可以更安心的共享美味料理。臺北市市長柯文哲與 40 名長者相約共進午餐，並率領臺北市政府衛生局局長黃世傑及臺北市政府社會局局長許立民共同向市民宣布「共餐據點食安把關」正式啟動。



Appendix Chronology of Department of Health, Taipei City Government

Month	Date	Chronology Content
January	03	Convened the 2 nd meeting in 2017 for the Taipei Municipal Hospital Supervisory Team as commissioned by Taipei City Government.
	07	The Department of Health, Taipei City Government, and Taipei Pharmacists Association jointly held the “Celebration of 2017 Pharmacists Day and the 4 th Excellent Pharmacists Recognition Ceremony in Taipei City” at Cosmos Hotel, TICC. Shier-Chieh Huang, Commissioner of the Department of Health, attended the ceremony to deliver a speech and present the awards. Taipei City Mayor Wen-Je Ko and Penghu County Deputy Magistrate Jie-Shin Lin signed the Letter of Intent for the “Taipei & Penghu Family Pharmacist Collaboration Project” at a press conference, whereby the Department of Health, Taipei City Government invited representatives from Taipei City Hospital and Taipei Pharmacists Association to work together and help Penghu County establish its model of long-term pharmaceutical care.
	16	The 12 district health centers in Taipei City received 7 awards in the “Role Model of Elderly-Friendly Healthcare Facility Selection” and “Creative Proposals for Certification of Elderly-Friendly Healthcare Facilities” from the Health Promotion Administration, Ministry of Health and Welfare in 2017, making Taipei City the number 1 municipality in Taiwan in terms of the most number of awards won for elderly-friendly healthcare services and facilities. The awards were presented at the municipal administrative meeting.
	22	The Department of Health, Taipei City Government published the press release titled “Announcement of New Food Safety Policies from the Department of Health: Reporting for western-styled catering services starting from March and launch of Food Safety Smile Label in May” to pre-announce the new policies for food safety that will be implemented in 2018. In March, catering service providers for cold platters, sushi, salads and other western-styled food will be required to report to the Department in advance. Starting from May, the Department will launch the “Food Safety Smile Label” for night markets by focusing on the four aspects of “food ingredient traceability”, “personnel hygiene”, “preparation environment hygiene” and “vector prevention” by designing a standard of hygiene and sanitation assessment that is suitable for night market vendors in order to ensure food safety in Taipei City.
	25	The “Expert Meeting on Responses to Flu Outbreak” was held at the peak of the epidemic and discussion was made with the experts on the prevention and control of the flu.
	29	The Department of Health, Taipei City Government issued a press release titled “Department of Health and 8 medical centers making early preparations in response to potential influenza pandemic” to announce information relating to the additional ILI clinics that will be available during the Lunar New Year period.
February	10	Mayor Wen-Je Ko took on the role as “One-Day Community Doctor” and visited to disadvantaged seniors and patients with disabilities in the communities in Wanhua District.
March	13	On March 13, 14, 22, and 26, the Department of Health held 2 sessions of the Health Inspection Practice Workshop (I) at the Department of Civil Servant Development with 82 participants.
	17	The Department of Health, Taipei City Government organized the “Food Safety Information at Your Fingertips Fair” (as a part of the Food Safety Week campaign) at the pedestrian area of Xinyi District to disseminate relevant food safety policies and invited other external agencies to set up specific booths to present relevant information, such as Taiwan Food and Drug Administration’s booth of departmental stores, the introduction to “4 labels and 1 QR code” by the Department of Education, the night market section by the Taipei City Market Administration Office and so forth.
	20	In conjunction with efforts by Department of Social Welfare, Taipei City Government to push for quick establishment of community care spots, the Department of Health has compiled a list of 150 care spots by means of voluntary registration by spot administrators and identifying spots that serve significant quantity of food in order to designate personnel at these 150 spots to assist food preparation personnel in relevant concepts of food safety so that citizens can enjoy delicious food without having to worry about food safety. Mayor Wen-Je Ko invited 40 senior citizens to have lunch together and along with Department of Health Commissioner Shier-Chieh Huang and Department of Social Welfare Commissioner Li-Min Hsu, the Mayor announced to the citizens that “Food Safety Protection at Joint Meal Sites for Senior” is officially launched.



月份	日期	內容說明
3 月	20	臺北市為華人地區之首，簽署國際性愛滋防治合作計畫「巴黎宣言」，成為「Fast-track Cities 愛滋快速通道城市」的一員，與國際建立經驗、資源交流管道，目標於 2030 年達成「AIDS Free Generation 免於愛滋的世代」的終極目標。
	20	臺北市立聯合醫院昆明防治中心推動臺北市為華人地區之首簽署國際性愛滋防治合作計畫「巴黎宣言」，成為「Fast-track Cities 愛滋快速通道城市」的一員，與國際建立經驗、資源交流管道。
	24	臺北市府首長領航營－106 年度策略地圖執行成果發表會－精進健康安全（G 組）榮獲評比第二名。
	26	臺北市府衛生局榮獲衛生福利部 2017 年地方衛生機關業務考評成績，整體排名第 1 組第 6 名。
	28	臺北市府衛生局偕同各局處共同召開「臺北市府食品安全委員會第 13 次會議」，臺北市市長柯文哲蒞臨指導。
	29	臺北市立聯合醫院與政治大學教學醫院簽約儀式暨交流研討會。
	31	臺北市府衛生局局長黃世傑親自率隊前往澎湖，偕同臺北市聯合醫院及臺北市藥師公會一行，跨海拜會澎湖縣政府，共同視察臺北市輔導澎湖縣推動家庭藥師計畫成果。該合作計畫協助澎湖縣完成 9 個老人關懷據點及居家共計 124 人次個案藥事訪視，提供多重用藥、藥物交互作用、用藥諮詢等藥事照護服務，並成功建立澎湖縣在地藥事服務照護模式。
4 月	13	登革熱及茲卡（Zika）疫情防治第 1 次工作會報，由臺北市府 33 個局處、防疫專家及衛生福利部疾病管制署與會，針對疫情及防治成果分享，共同精進防疫策略。
	13	107 年第 1 次腸病毒防治工作會議，鄧副市長主持，聯合教育局、社會局、勞動局等相關局處進行流行期前整備，邀請疾病管制署、兒童感染科專家列席指導。
	15	臺北市府衛生局辦理食安週系列活動之「食安西遊記－外燴報備園遊會」，依據《臺北市食品安全自治條例》，公告自 107 年 3 月起所有食品業者承攬超過 200 人份以上西式外燴 Buffet，都應事先向衛生局進行報備，衛生局除事前審核菜單設計安全外，更派員進行現場製造場所專案稽查，以預防疑似食品中毒事件發生。



Month	Date	Chronology Content
March	20	Taipei City Hospital became the first city in the Chinese-speaking parts of the world to sign and enter into the partnership by the International Association of Providers of AIDS Care by becoming a “Fast-Track Cities” to construct channels of experience and resource sharing with other members of the international community with the ultimate goal of achieving “AIDS Free Generation” by 2030.
	20	Operating under Taipei City Hospital, Kunming Prevention and Control Center is responsible for the task of AIDS prevention in Taipei City, which became the first city in the Chinese-speaking parts of the world to be accepted into the partnership by the International Association of Providers of AIDS Care by becoming a “Fast-Track Cities” to construct channels of experience and resource sharing with other members of the international community.
	24	At the 2017 Strategy Map Implementation Outcome Presentation of Taipei City Government Pioneer Camp for Administrative Chiefs, the Department of Health placed 2 nd in the Improvement of Health and Safety (division G).
	26	In the 2017 local health agency performance evaluation by the Ministry of Health and Welfare, the Department of Health, Taipei City Government came in 6 th place in group 1 in the overall ranking.
	28	The Department of Health, Taipei City Government, and all other relevant departments/offices held the “13 th Meeting of the Taipei City Government Food Safety Committee”. Mayor Wen-Je Ko attended the meeting and gave instructions.
	29	Taipei City Hospital held an agreement signing ceremony and exchange seminar with NCCU Teaching Clinic.
	31	Department of Health Commissioner Shier-Chieh Huang led a group of representatives from Taipei City Hospital and Taipei Pharmacists Association on an official visit to Penghu County Government to review the results and outcome of family pharmacists project promotion in Penghu County as assisted by Taipei City. The collaborative program enabled Penghu County to set up 9 senior citizen care spots and a total of family pharmacists visits made for 124 Penghu residents to provide care and guidance on polypharmacy, drug-drug interactions, medication consultation and so forth. The program has successfully established a local pharmacist service care model in Penghu County.
April	13	The 1 st staff conference for the prevention of dengue fever and Zika viruses took place. 33 departments/offices of the Taipei City Government, disease prevention experts and the Centers for Disease Control of the Ministry of Health and Welfare attended the conference to share the results of epidemic prevention and improve disease prevention strategies together.
	13	The 1 st staff conference for the prevention of enterovirus in 2018 was chaired by Deputy Mayor Chia-Ji Teng and attended by the Department of Education, Department of Social Welfare and Department of Labor to discuss the preparatory tasks that need to be carried out prior to the popular season for the virus. Representatives from the Centers for Disease Control and experts in pediatric infection were invited to give their advice on the matter.
	15	The Department of Health, Taipei City Government organized the “Food Safety Journey to the West - Catering Service Reporting Fair” (as a part of the Food Safety Week campaign) and officially announced that pursuant to Taipei City Self-Governing Regulations for Food Safety, since March 2018, all proprietors of western-styled buffet catering services involved in the preparation of meals for 200 or more patrons are required to notify the Department of Health in advance. Apart from reviewing the safety of menu design before hand, the Department will also dispatch personnel to audit the premise of food preparation to prevent potential incidence of food poisoning.



月份	日期	內容說明
4 月	23	臺北市府衛生局率全國之先於 6 家醫療院所辦理「兒童健康服務整合一站式服務」，提供身體檢查、兒童發展、口腔、視力、聽力等 5 項檢查提供 1,251 人服務，至 8 月 31 日止。
	27	臺北市立聯合醫院舉辦 2018 臺日社區居家整合醫療論壇。
	30	為因應氣候變遷，全球暖化防疫之需，公告臺北市防止病媒蚊孳生，預防登革熱之孳生源清除防疫措施。
5 月	07	辦理「我的女力時代！『婦』出行動防癌無懼」記者會，當日臺北市市長柯文哲的太太陳佩琪醫師以北市防癌大使身分出席活動，親自分享罹癌經驗，呼籲女性要多多愛自己健康，定期接受四癌篩檢，以早期發現、及早治療。
	07	臺北市立聯合醫院舉辦 2018 臺美衛生福利政策研討會－聯醫座談會。
	21	臺北市府衛生局辦理全國首創夜市專屬的「食品安全微笑標章」，只要通過「人員衛生、製作環境衛生、食材溯源追蹤及病媒防治」等 4 大面向檢核，即可獲得食安微笑金質或銀質標章。今年首先推動「士林市場、寧夏夜市及華西街夜市」等 3 處國際觀光夜市做為示範，共計 169 家夜市攤商獲獎。
	24	臺北市立聯合醫院與臺灣精實醫務管理學會、臺灣醫療品質協會共同舉辦亞洲第一屆精實醫療國際高峰會暨研討會。
	28	臺北市立聯合醫院昆明防治中心與法務部及國立自然科學博物館於西門町捷運站出口合作辦理「藥不藥·一念間」反毒行動博物館巡迴特展，107 年 5 月 28 日～ 107 年 6 月 15 日為期 19 天，共計 5,100 人次參觀。
	29	訂定「臺北市醫療院所暨藥局智慧用電補助計畫要點」，並自 107 年 5 月 18 日起生效。



Month	Date	Chronology Content
April	23	The Department of Health, Taipei City Government became the first municipal health agency to implement the “One-Stop Health Service For Children”, which involves a comprehensive health check-up that include aspects of physical examination, child development, oral hygiene, eyesight and hearing for a total of 1,251 children. The service concluded on August 31.
	27	Taipei City Hospital held the 2018 Taiwan-Japan Community and Home Integrated Healthcare Forum.
	30	In light of climate changes and trends of global warming, the Department of Health has made official announcements on the prevention of vector mosquito breeding in Taipei City and relevant measures that will be taken to eradicate the potential mosquito breeding spots to prevent Dengue fever.
May	07	Organized the “My Era of Women Power! Fearless Actions in Cancer Prevention” press conference, in which Peggy Chen (Mayor Wen-Je Ko's wife) attended as Taipei City's Cancer Ambassador to share her personal experience in combating cancer. She called out to all women to take better care of their health by taking the four-cancer screening on a regular basis in order to achieve early discovery and preemptive treatment.
	07	Taipei City Hospital held the 2018 Taiwan-U.S. Health and Welfare Policy Symposium.
	21	The Department of Health, Taipei City Government introduced the “Food Safety Smile Certification” - the first label specifically intended for night markets vendors, who will be able to receive Food Safety Smile Gold/Silver Label by passing the inspection that focuses on four major aspects of “personnel hygiene, preparation environment hygiene, food ingredient traceability and vector prevention” For the first year, the Department prioritized the three major international tourism night markets of “Shilin Market, Ningxia Night Market and Huaxi Street Night Market”, with a total of 169 vendors receiving the label.
	24	Together with Taiwan Lean Healthcare Management Association and Taiwan Healthcare Quality Association, Taipei City Hospital organized the 1 st Asia Lean Healthcare International Summit and Seminar.
	28	Taipei City Hospital Kunming Prevention and Control Center, the Ministry of Justice and the National Museum of Natural Science jointly organized the “To Do or Not to Do - One Critical Decision” Anti-Narcotics Mobile Museum Tour Exhibition at the entrance of MRT Ximending Station over a period of 19 days (May 28 - June 15, 2018). The exhibition attracted a total of 5,100 viewers.
	29	The Department of Health established the “Rules of Smart Power Usage Subsidy Plan for Medical Institutions and Pharmacies in Taipei City”, which came into effect on May 18, 2018.



附錄
臺北市衛生局大事紀要

月份	日期	內容說明
6 月	6	臺北市衛生局辦理「臺北市食藥安全聯合查緝平台」第 3 次會議邀請臺灣臺北地方檢察署、臺灣士林地方檢察署、臺北市府法務局、臺北市府環境保護局、臺北市府教育局、臺北市府產業發展局、臺北市府警察局、臺北市市場處及臺北市商業處共同與會討論食安議題。
	11	臺北市衛生局偕同各局處共同召開「臺北市府食品安全委員會第 14 次會議」，臺北市副市長鄧家基蒞臨指導。
	12	臺北市衛生局辦理「食安條例－連鎖自助餐業者納入餐飲分級及定期檢查」說明會。
	23	臺北市立聯合醫院昆明防治中心與臺北捷運公司合作辦理反毒彩繪列車毒品防制宣導（冰原極地及罌粟花田），107 年 6 月 23 日～ 107 年 9 月 30 日於板南線行駛，共計 2,225 車次。
	27	臺北市衛生局偕同臺北市府產業發展局、臺北市府環境保護局、臺北市府教育局及臺北市市場處假臺北世貿中心辦理「臺北國際食品展食安嘉年華聯展」活動，約 4,000 人次進入臺北市展覽區參觀，至 6 月 30 日止。
7 月	01	臺北市衛生局辦理「開心篩、粉樂送」婦癌篩檢活動，凡設籍臺北市市民且符合篩檢資格完成子宮頸抹片或乳房 X 光攝影檢查，即可獲得刮刮卡，至 11 月 30 日止計 3 萬人次參加。
	01	臺北市衛生局率全國之先，於臺北市中正區推動「失智友善示範社區」結合產、官、學及民間等跨領域共同營造失智友善支持性環境。
	05	公告腸病毒進入流行警訊期，公文周知各學校機構，加強落實腸病毒通報及停課，以及環境消毒等防疫措施，防堵群聚疫情擴散。
	16	臺北市衛生局辦理「連鎖火鍋店業者檢驗美耐皿筷子之耐熱溫度、甲醛及三聚氰胺溶出量」說明會。
	16	臺北市立聯合醫院舉辦「推動分級醫療雙向轉診」誓師大會。
	31	臺北市衛生局獲衛生福利部食品藥物管理署頒發 106 年度「地方衛生機關業務考評作業」食品藥物類第 1 組優等獎，排名序位第 1 名。



Month	Date	Chronology Content
June	6	The Department of Health, Taipei City Government held the 3 rd meeting of the “Platform for Joint Inspection of Food and Drug Safety in Taipei City”. Representatives from the Taiwan Taipei District Prosecutors Office, Taiwan Shilin District Prosecutors Office, the Department of Legal Affairs, the Department of Environmental Protection, the Department of Education, the Department of Economic Development, Taipei City Police Department, Taipei City Market Administration Office and Taipei City Office of Commerce were invited to attend the meeting to discuss the issue of food safety.
	11	The Department of Health, Taipei City Government, and all other relevant departments/offices held the “14 th Meeting of the Taipei City Government Food Safety Committee”. The Deputy Mayor Chia-Ji Teng attended the meeting and gave instructions.
	12	The Department of Health, Taipei City Government held the information session on “Food Safety Regulations - Inclusion of Franchise Self-Service Food Providers in Food Grading and Routine Inspection”.
	23	Taipei City Hospital Kunming Prevention and Control Center and Taipei Rapid Transit Corporation collaborated in the organization of the Anti-Narcotics Promotion on MRT Trains with Thematic Illustrations (Polar Ice Cap and Poppy Fields). These special trains operated on MRT Bannan Line between June 23 and September 30, 2018, with a total of 2,225 runs.
	27	The Department of Health, Taipei City Government, along with the Department of Economic Development, Department of Environmental Protection, Department of Education and Taipei City Market Administration Office jointly organized the “Food Taipei - The Taipei International Food Show and Food Safety Carnival” at TWTC. Approximately 4,000 visitors came to the Taipei City area to check out the presented contents. The event concluded on June 30.
July	01	The Department of Health, Taipei City Government, held the gynecologic cancer screening event of “Happy Screening and Generous Gifts”. Any citizen of Taipei City who qualified for screening and took the pap smear test or mammography examination would receive a lottery scratchcard. 30,000 persons participated in the event by as of November 30.
	01	The Department of Health, Taipei City Government became the first municipal health agency in Taiwan to implement “Dementia Friendly Demonstration Community” in Zhongzheng District of Taipei City by integrating relevant resources from the sector, government, academia and private organizations in an effort to jointly create a supportive and friendly environment for dementia patients.
	05	The Department of Health, Taipei City Government made an official announcement on the beginning of the warning period for potential high season for enterovirus infections and issued official instructions to all schools and care facilities to duly implement enterovirus infection notification and suspension of classes along with relevant disease prevention measures such as sterilization of premises to prevent potential cluster infections.
	16	The Department of Health, Taipei City Government hosted an information session on the “Inspection of Heat Resistance and Migration Limit of Formaldehyde and Melamine for Melamine Chopsticks for Franchise Hot-Pot Proprietors”.
	16	Taipei City Hospital held a rally for the promotion of healthcare classification and bilateral medical referral.
	31	The Department of Health, Taipei City Government received the Outstanding Award with 1 st placement in the Food and Drug Category in the 2017 “Local Health Agency Performance Evaluation” by the Food and Drug Administration, Ministry of Health and Welfare.



月份	日期	內容說明
8 月	03	登革熱及茲卡（Zika）疫情防治第 1 次臨時會，由臺北市府相關局處、防疫專家及衛生福利部疾病管制署與會，因應本土登革熱疫情各局處分工。
	07	臺北市府衛生局榮獲「臺北市府各機關構 105 至 106 年推動性別平等工作獎勵計畫」團體獎第 1 名。
	16	臺北市府衛生局辦理癌症篩檢工作績效優異榮獲衛生福利部國民健康署「四癌追蹤效率王第一名」佳績。
	16	臺北市府衛生局於臺北市公務人員訓練處辦理「衛生稽查實務研習班（二）」兩梯次，8 月 16、17、21 及 22 日共計 80 人參與。
	29	臺北市府衛生局辦理「107 年度食材登錄平台成果發表會」，推出全新「連鎖早餐店專區」，更依據臺北市食品安全自治條例預告，北市 3 家（含）以上營業據點之手搖飲業者應強制加入平台及標示 QR code，提升食安透明。
	30	登革熱及茲卡（Zika）疫情防治第 2 次臨時會，由臺北市府相關局處、防疫專家及衛生福利部疾病管制署與會，因應本土登革熱疫情，有關菜園及田園城市之管理及分工事宜，提請討論。
9 月	05	臺北市府衛生局與衛生福利部國民健康署創全國之先以「API」介接癌症篩檢資料並以自動化及視覺化進行癌症防治成效監控作業，以即時依民眾需求提供服務及調整策略。
	07	臺北市府衛生局結合臺北市府資訊局運用臺北市府官方 LINE，首創各縣市以「防癌知識+」智能機器人提供服務，民眾透過 LINE 點選選單或詢問即可得到癌症防治相關訊息。
	07	臺北市府衛生局發布「臺北市衛生局要求亞培 48 小時內預防性下架『亞培原味安素』等 6 款產品」新聞稿，要求美商亞培股份有限公司台灣分公司即日起（107 年 9 月 7 日 17：00）依據臺北市食品安全自治條例第 10 條，於 48 小時內完成預防性下架。
	08	辦理「2018 癌症篩檢健康政策講座暨記者會」以「蛻變創新引領健康」思維，邀請衛生福利部國民健康署王英偉署長、臺北市 25 家癌品醫院及醫師公會等各領域專家共同研商推動癌症防治政策。
	15	臺北市立聯合醫舉辦失智月活動「在憶。失智歲月－I Can Support You 守護記憶台北憶起來」活動。
	20	臺北市府衛生局偕同各局處共同召開「臺北市府食品安全委員會第 15 次會議」，臺北市副市長鄧家基蒞臨指導。



Month	Date	Chronology Content
August	03	The 1 st ad hoc meeting for the prevention of dengue fever and Zika viruses was held for relevant departments/offices of the Taipei City Government, disease prevention experts and the Centers for Disease Control of the Ministry of Health and Welfare to take part to discuss the division of tasks and responsibilities for Dengue fever prevention in the municipality.
	07	The Department of Health, Taipei City Government received the No.1 Team Award in the “Promotion of Gender Equity Incentive Program in 2016/2017 for all Taipei City Government Departments”.
	16	The Department of Health, Taipei City Government received the title of “Best in Four Cancer Screening Follow-up Efficiency” for outstanding performance in the implementation of cancer screening from the Health Promotion Administration, Ministry of Health and Welfare.
	16	On August 16, 17, 21 and 22, the Department of Health held 2 sessions of the Health Inspection Practice Workshop (II) at the Department of Civil Servant Development for a total of 80 participants.
	29	The Department of Health, Taipei City Government organized the 2018 Food Tracer Taipei Presentation and revealed the new inclusion of “Franchise Breakfast Restaurant Section”. In accordance with the pre-announcement that was made on the Taipei City Self-Governing Regulations for Food Safety, hand-made beverage providers operating 3 (including) or more stores have been mandatorily included in the platform and are now required to display the QR code accordingly to improve food safety transparency.
	30	The 2 nd ad hoc meeting for the prevention of dengue fever and Zika viruses was held for relevant departments/offices of the Taipei City Government, disease prevention experts and the Centers for Disease Control of the Ministry of Health and Welfare to take part to discuss the division of tasks and responsibilities for Dengue fever prevention in the municipality with regards to the management of vegetable gardens and farm city.
September	05	Together with the Health Promotion Administration, Ministry of Health and Welfare, the Department of Health, Taipei City Government set the first instance in Taiwan of using “API” to interface cancer screening data and implement cancer prevention outcome monitoring through automation and visualization features so as to provide relevant services in real time as needed by citizens and make relevant adjustments in strategies when necessary.
	07	The Department of Health, Taipei City Government collaborated with the Department of Information Technology and launched the first “Cancer Prevention Knowledge Assistant” smart-service - a chat bot that operates through Taipei City Government’s official LINE account that enables citizens to acquire cancer prevent related information by selecting the relevant menus or directly asking the chat bot via LINE.
	07	The Department of Health, Taipei City Government issued a press release titled “Department of Health orders Abbott Taiwan to remove 6 products including “Ensure” from store shelves within 48 hours” and instructed Abbott Taiwan to complete the process of preventive removal of all 6 products in accordance to Article 10 of Taipei City Self-Governing Regulations for Food Safety within 48 hours effective immediately (17:00 hours on September 7, 2018).
	08	With the theme of “Leading the way to health through evolution and innovation”, the “2018 Cancer Screening Health Policy Seminar and Press Conference” was held by the Department of Health. Health Promotion Administration Director General Ying-Wei Wang, along with other representatives and experts from the 25 cancer quality hospitals in Taipei City and Taiwan Medical Association took part in the event to discuss the current state and promotion of cancer prevention policies.
	15	Taipei City Hospital organized the “Reminiscing the Memories Lost - I Can Support You in Taipei” event for the Month of Dementia campaign.
	20	The Department of Health, Taipei City Government, and all other relevant departments/offices held the “15 th Meeting of the Taipei City Government Food Safety Committee”. The Deputy Mayor Chia-Ji Teng attended the meeting and gave instructions.



月份	日期	內容說明
10 月	05	臺北市府衛生局推派 3 支隊伍參加衛生福利部國民健康署舉辦之「2018 樂靈活現－阿公阿嬤活力旺」全國總決賽，分別獲得活力舞臺組金牌、銅牌，及活力律動組最佳創意獎、最佳人氣獎等殊榮。
	05	臺北市府榮獲行政院「106 年獎勵地方政府落實推動食安五環改革政策計畫」評比第 1 名。
	09	臺北市府衛生局辦理「107 年度餐飲衛生管理分級成果發表會」，臺北市市長柯文哲出席致詞並頒獎，從 104 年起全面推動餐飲衛生管理分級，串起食安網絡，4 年來已經超過 2,000 家業者通過評核，全面提升臺北市餐飲衛生，成為安心外食的標竿城市。
	16	臺北市府衛生局「食藥粧網路地圖計畫」獲頒臺北市府 107 年度「第七屆行政透明獎」優選，排名序位第 1 名。
	17	臺北市府衛生局首創持續推動健康城市，整合健康、高齡友善及社區安全共同推動，於馬來西亞古晉市辦理「第 8 屆西太平洋健康城市國際研討會」榮獲 2 項創新發展獎，為全國最多。
	19	臺北市府衛生局獲頒臺北市府第一屆精實管理成果觀摩會衛生醫療壁報展「最佳美編獎」第 1 名；「最佳創意獎」第 2 名；「最佳人氣獎」第 3 名。
	25	修正「臺北市醫療院所暨藥局智慧用電補助計畫要點」第五點、第六點、第七點及第八點，並自 107 年 10 月 18 日生效。
	26	登革熱及茲卡（Zika）疫情防治第 2 次工作會報，由臺北市府 33 個局處、防疫專家及衛生福利部疾病管制署與會，針對疫情及防治成果分享，共同精進防疫策略。
	26	107 年第 2 次腸病毒防治工作會議，鄧副市長主持，教育局、社會局與會，持續與相關局處溝通協調，邀請疾病管制署、兒童感染及小兒科專家列席，精進防疫工作。



Month	Date	Chronology Content
October	05	The Department of Health, Taipei City Government sent three teams to take part in the finals of the “2018 Energetic Seniors - Grandpa & Grandma Vitality National Competition” organized by the Health Promotion Administration and received several awards and distinctions, including gold medal, bronze medal and Award for Best Creativity in the “rhythm with vigor” category and Award for Most Popularity and so forth.
	05	Taipei City Government came in 1 st place in the overall rating of “Incentive Program for Local Governments to Implement and Promote the 5-Ring Food Safety Reform Policy in 2017” by the Executive Yuan.
	09	The Department of Health, Taipei City Government organized the “Taipei City Food Sanitation Management Grading and Assessment Presentation for 2018”, in which Mayor Wen-Je Ko attended. Mayor Ko addressed the participants and presented the awards to their respective winners. Since the full promotion of food sanitation management grading in 2015, the Department has sought to create a network of food safety, with more than 2,000 proprietors and service providers having passed the assessment within the past 4 years to substantially raise the bar of food safety in Taipei City, making it a benchmark city for citizens who eat out.
	16	The Department of Health, Taipei City Government ranked 1 st in the “7 th Administrative Transparency Award” organized by Taipei City Government in 2018 for the “Food and Drug Inspection Map Project”.
	17	For its efforts to continue the promotion of healthy city by integrating health, elderly friendliness and community safety, the Department of Health, Taipei City Government received two Innovative Development Awards (most awards won in Taiwan) at the 8 th Alliance for Healthy Cities 2018 held in Kuching, Sarawak, Malaysia.
	19	The Department of Health, Taipei City Government came in 1 st place in the “Best Art Award”, 2 nd place in the “Best Creativity Award” and 3 rd place in the “Most Popular Award” in the healthcare wall poster exhibition in the 1 st Lean Management Outcome Presentation organized by Taipei City Government.
	25	Amendments were made to Points 5, 6, 7 and 8 in the “Rules of Smart Power Usage Subsidy Plan for Medical Institutions and Pharmacies in Taipei City”. The amendments came into effect on October 18, 2018.
	26	The 2 nd staff conference for the prevention of dengue fever and Zika viruses took place. 33 departments/offices of the Taipei City Government, disease prevention experts and the Centers for Disease Control of the Ministry of Health and Welfare attended the conference to share the results of epidemic prevention and improve disease prevention strategies together.
	26	The 2 nd staff conference for the prevention of enterovirus in 2018 was chaired by Deputy Mayor Chia-Ji Teng and attended by the Department of Education and Department of Social Welfare to continue with relevant coordination and communications. Representatives from the Centers for Disease Control and experts in pediatrics and pediatric infection were invited to assist in the improvement of disease prevention.



月份	日期	內容說明
11 月	12	臺北市府衛生局於臺北市公務人員訓練處辦理衛生稽查實務研習班（三）兩梯次，11 月 12 日至 13 日共計 68 人參與。
	20	臺北市府衛生局「北市家藥典範佳澎湖菊島到陣行～臺北澎湖合作推動家庭藥師計畫」獲頒臺北市府 107 年度創意提案競賽「跨域合作獎」季軍。
	27	臺北市立聯合醫院辦理「2018 臺北安寧國際研討會」。
	28	臺北市立聯合醫院舉辦「醫復養康、社區共融、智慧服務、策略聯盟 臺北市立聯合醫院場域實驗試辦計畫啟動記者會」活動。
	29	臺北市府衛生局假臺北市市政大樓 1 樓中庭舉辦 107 年度臺北市衛生保健志願服務志工暨團隊楷模獎表揚大會，由臺北市副市長鄧家基及黃局長世傑頒發 60 項衛生保健志工、30 項天使志工及 9 項績優防癌志工獎項，共計 280 人參加表揚大會。
	30	臺北市立聯合醫院昆明防治中心辦理世界愛滋日系列活動「愛在昆明 50 年暨愛滋防治新視野主題特展&愛滋影展&愛滋論壇&衛教市集」，共計 8,560 人次參與，至 12 月 2 日止。
12 月	03	國立臺灣大學醫學院附設癌醫中心醫院開業。
	06	臺北市府衛生局舉辦「107 年度臺北市營業場所衛生優良自主管理分級認證授證典禮」，全國首創推動旅館業、美容美髮業、浴室業、娛樂業、游泳業及電影片映演業等六大業別之營業衛生自主管理認證。
	12	臺北市府衛生局榮獲「衛生福利部國民健康署頒發 107 年地方政府衛生局推動健康職場優等獎」。



Month	Date	Chronology Content
November	12	On November 12 and 13, the Department of Health, Taipei City Government, held 2 sessions of the Health Inspection Practice Workshop (III) at the Department of Civil Servant Development of the Taipei City Government, with 68 participants.
	20	The Department of Health, Taipei City Government came in 3 rd place in the category of "Cross-Boundary Collaboration" in the 2018 Creative Proposal Competition organized by Taipei City Government for its proposal of "Bringing Taipei City's Home Pharmacist to Ju Island - Taipei-Penghu Collaboration in the Promotion of Family Pharmacist Project".
	27	Taipei City Hospital organized the "2018 Taipei International Palliative Care Seminar".
	28	Taipei City Hospital held the "Medical Rehabilitation, Community Prosperity, Smart Services and Strategic Alliance - Taipei City Hospital Field Experiment Pilot Program Initiation Press Conference".
	29	The Department of Health, Taipei City Government, held a ceremony to honor the recipients of the 2018 Award for Exemplary Volunteers and Teams Providing Voluntary Services of Sanitation and Healthcare in Taipei City at the lobby on the 1 st floor of the Taipei City Hall. During the ceremony, Deputy Mayor Chia-Ji Teng and Department of Health Commissioner Shier-Chieh Huang presented 60 awards to health service volunteers, 30 "angel volunteers" and 9 awards to cancer prevention volunteers for their outstanding performance. A total of 280 persons attended the ceremony.
	30	Taipei City Hospital Kunming Prevention and Control Center organized the World AIDS Day event "50 years of Love at Kunming & Special Exhibition on New Perspective for AIDS Prevention & AIDS Film Festival & AIDS Forum & Health Education Market". These activities attracted a total of 8,560 participants and concluded on December 2.
December	03	National Taiwan University Cancer Center became operational.
	06	The Department of Health, Taipei City Government, held the "2018 Taipei City Outstanding Business Area Sanitation Self-Management Classifying and Assessment Certifying Ceremony" and promoted the nation's first assessment of self-management of business sanitation for hotels, beauty salons, bathhouses, entertainment industry, swimming pools and movie theaters.
	12	The Department of Health, Taipei City Government received the Outstanding Local Health Department in Healthy Workplace Promotion in 2018" from the Health Promotion Administration, Ministry of Health and Welfare.



月份	日期	內容說明
12 月	15	臺北市府配合衛生福利部疾病管制署「結核病－智慧關懷卡試辦計畫」，全國首次以「智慧關懷卡」取代傳統紙本「結核病／潛伏結核感染治療手冊」，以e化方式進行結核病及潛伏結核感染個案看診服務及個案管理。
	17	臺北市府衛生局偕同各局處共同召開「臺北市府食品安全委員會第 16 次會議」，臺北市市長柯文哲蒞臨指導。
	20	2018 臺北上海城市論壇－大健康產業交流分論壇。
	24	臺北市府衛生局假所屬北投區健康服務中心 1 樓會議室辦理「臺北市 107 年推動癌症防治績優醫院暨十二區健康服務中心品質提升獎勵頒獎典禮」，參與人數 175 人。
	26	臺北市府衛生局發布「亞培未通報臺北市衛生局將依食安條例再開罰 10 萬元」新聞稿，107 年 12 月 20 日晚間接獲媒體通知亞培 2 款塑膠瓶裝產品又有凝結客訴，經行文美商亞培公司，始獲知亞培內部調查「亞培沛力」及「原味菁選」共有 9 件客訴，卻未通報臺北市衛生局，依違反臺北市食品安全自治條例第 10 條規定，再次開罰 10 萬元罰鍰。
	31	臺北市府衛生局公告「臺北市登山步道自 107 年 12 月 31 日起為全面禁止吸菸場所」。



Month	Date	Chronology Conten
December	15	In conjunction with the "TB - Smart Care Card Pilot Program" implemented by the Centers for Disease Control under Ministry of Health and Welfare, the Department of Health, Taipei City Government became the first municipal health department to adopt "Smart Care Card" as a replacement for the traditional printed "TB/Latent TB Infection Treatment Handbook" to implement electronic diagnostics and management of TB/latent TB cases.
	17	The Department of Health, Taipei City Government, and all other relevant departments/offices held the "16 th Meeting of the Taipei City Government Food Safety Committee". Mayor Wen-Je Ko attended the meeting and gave instructions.
	20	2018 Taipei-Shanghai Forum - Health Industry Exchange Forum.
	24	The Department of Health, Taipei City Government held the "Award Presentation Ceremony for Hospitals and 12 District Health Service Centers with Outstanding Performance in the Promotion of Cancer Prevention and Service Quality Improvement" at the 1F Conference Room of Beitou District Health Service Center. The event was attended by 175 participants.
	26	The Department of Health, Taipei City Government issued a press release titled "Abbot Taiwan to face NT\$ 100,000 fine for failing to notify Department of Health in accordance to self-governing regulations for food safety". In the evening of December 20, 2018, the Department received notification from the media regarding instances of customer complaint on the quality deterioration of 2 Abbotts products sealed in plastic bottles. After making an official inquiry with Abbott Taiwan, the Department found that the company had received a total of 9 customer complaints for "Abbott Ensure" and "Abbott Ensure Elite" but had withheld the complaints from the Department. Pursuant to Article 10 of Taipei City Self-Governing Regulations for Food Safety, the company would face another fine of NT\$ 100,000.
	31	The Department of Health, Taipei City Government, announced that the "all mountain hiking trails in Taipei City" have been designated as non-smoking sections effective from December 31, 2018.



TAIPEI 臺北市
衛生醫療年鑑

編者：臺北市政府衛生局

發行人：黃世傑

內容大要：107 年度臺北市衛生醫療年鑑記載衛生局暨所屬單位 107 年度推動各項公共衛生及醫療預防保健各項業務執行之成果，以及推動健康城市的努力；內容含括行政組織之重整，三段五級預防保健以及衛生統計資料。

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Summary of contents: "Public Health of Taipei City Annual Report 2018" documents the achievements of the Department of Health, Taipei City Government and its subordinate organizations in public health, medical care and health promotion, as well as the efforts made in promoting the Healthy City campaign. Contents include the restructuring of the administrative organization, the primary, secondary, tertiary prevention in healthcare, and health statistics.

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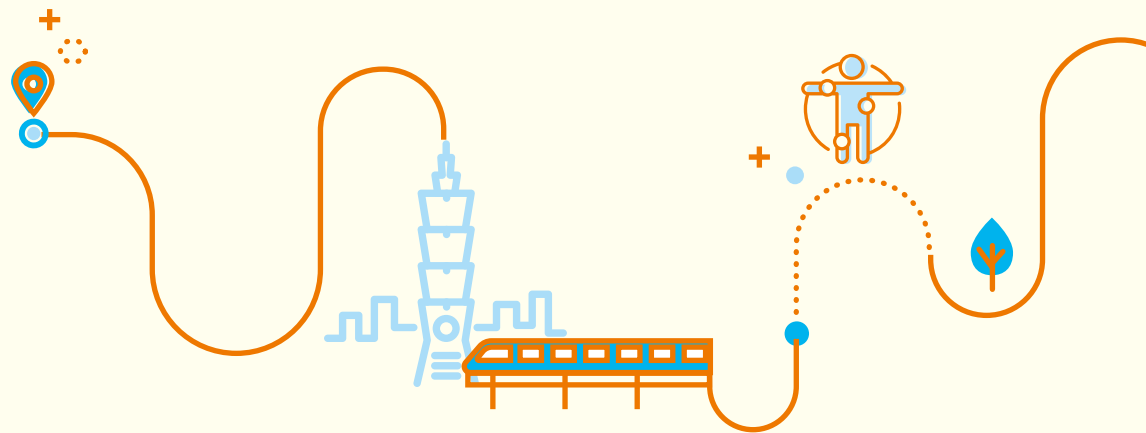
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