

方法/Methods：對象經由醫師診斷為初次腦中風之個案，使用研究工具則為運用病歷資料收集、實驗室生化指標及追蹤後個案醫療資源使用情形，透過健康促進理論介入於腦中風個案管理，分為傳統組及健康促進組。

結果/Results：兩組平均年齡為傳統組 68.0±10.2 歲而健康促進組為 68.0±12.8 歲，其過去疾病類型兩者間並無顯著性差異，所得結果發現傳統型個案其平均住院天數 12.05 天，而介入為 11.5 天有顯著性差異，介入過後其所使用之社會資源包括居家護理轉介、殘障福利申請等之社會資源運用及後續門診醫療追蹤有明顯增加並且兩組間有顯著性差異，因此透過團隊整合運用健康促進介入，使得住院天數降低並間接減少醫療成本支出，更促使主要照顧者獲得更多社會資源及後續持續性照顧。

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園藝治療對護理之家老人心理健康之成效

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目的：探討園藝治療對於護理之家老人心理健康之成效。

研究方法：採單組前後測之類實驗性研究設計，樣本來自台灣某護理之家，採立意取樣，共 10 位 60 歲以上的老人參與本研究。由研究者設計園藝治療課程，帶領研究對象進行為期十週，每週一次的園藝治療活動，以老人憂鬱量表簡版、孤寂感量表第三版為評估心理健康之工具，於第一週活動進行前及第十週活動結束後，採面對面訪談方式收集資料，並以 Wilcoxon signed rank test 進行分析。

研究結果：經過十週園藝治療課程發現(1)憂鬱程度：80%老人(n=8)接受園藝治療課程後，其憂鬱程度有顯著改善 (p<.05)。 (2)孤寂感：80%老人(n=8)接受園藝治療後，其孤寂感有顯著改善 (p<.05)。由此可知，園藝治療能改善護理之家老人的心理健康。

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安養機構老人健康促進行為之探討

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目的：探討安養機構老人健康促進行為之執行經驗與協助需求。

研究方法：採質性研究法，樣本來自台灣中部地區三所安養機構，採立意取樣，共訪談 30 位 65 歲以上的老人，質性訪談之錄音檔均謄寫成書面資料，並以內容分析法進行分析。

研究結果：老人健康促進行為之執行共可歸納為三個類別：(一)執行身體保健，包括規律運動、參與機構的休閒活動、控制飲食、遵從醫囑；(二)秉持正向的人生態度，包括活在當下、維持適當的人際接觸、幫助他人；(三)維持心靈的平和，包括保持愉悅的心情、尋求宗教的慰藉、接受老化與死亡。此外，老人有關健康促進行為之協助需求則歸納為四方面：多舉辦懷舊的活動、多

舉辦戶外活動、能獲取醫療保健相關訊息、提供心理輔導、研究發現可供未來擬定機構老人健康促進行為的照護計畫之參考、以提昇機構照護品質與老人的生活品質。

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Enrichment in Quality of Life: Eating Good in a Residential Home

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To ensure good care delivery, different measures in monitoring of falls, bedsores, extent of restraint, loss of body weight and infections were developed as the quality indicators in residential homes. However, Alfred T. Hoffmann (2008) has identified that enrichment of quality of life is not only on the strong emphasis of nursing care at care homes but individual joy and pleasure in the daily lives of the residents.

Although enjoyment of food is so important (民以食為天), and eating is actually basic in a person's life, it is rarely documented as one of enjoyments to enhance our quality of life. At Haven of Hope Nursing Home in Hong Kong, a team of dedicated trans-disciplinary staff has attempted to address this enjoyment given the strong desires of the elderly residents and yet with increasing physical limitations to enjoy delicious food.

Since 2001, the monthly feast (每月美食), with the team of nurses, occupational therapist, frontline care workers and our innovative cooks, has been served according to the needs of different care level of our elderly residents, particularly those with declined chewing and swallowing capabilities. The tailored-made monthly themed feasts are not only Cantonese banquets menu but for variety also include 上海菜, 東南亞美食, 客家, 潮州, 自家製盆菜, 海鮮, 藥膳 etc is served up in set tables restaurant-style. Our elderly residents are able to have restaurant-dining experiences of good taste with appropriate texture in attraction (色香味美) without going out to dine in a restaurant. The continuous quality improvement in the past 10 years has made this monthly event the highlight and most looked-forward for event for the elderly residents. They often express that they could not imagine that they can still 'dine like this' with their eating limitations.

The presentation will highlight our trans-disciplinary team efforts, the difficulties encountered and how they were overcome in the past 10 years in this meaningful quality-of-life enrichment initiative.

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The Effect of Appropriate Seating Surfaces on the Level of Agitation and Well-being of Frail, Immobile and Demented Residents Living in Two Local Care & Attention Homes

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Objectives: To investigate the effect of an appropriate seating surface on the levels of agitation and well-being of frail, immobile and demented residents living in two local care-and-attention homes.