• 系統編號	RN9308-0822		
• 計畫中文名稱	合理門診量---以護理人員爲高血壓病患衛教者的成本分析		
• 計畫英文名稱	Optimum Outpatient Visit---A Cost Analysis of Hypertensive Patient Education Program by Nurses as Health Educator		
• 主管機關	行政院國家科學委員會	• 計畫編號	NSC90-2314-B038-026
• 執行機構	臺北醫學大學護理學研究所		
• 本期期間	9008 ~ 9112		
• 報告頁數	12 頁	• 使用語言	中文
• 研究人員	張文英; 張碧真 Chang, Wen-Yin; Chang, Pi-Chen		
• 中文關鍵字	合理門診量; 護理人員; 高血壓; 成本分析		
• 英文關鍵字	Optimum outpatient visit; Nurse; Hypertension; Cost analysis		
• 中文摘要	本研究目的旨在探討以護理人員爲門診高血壓病患的衛教者，在衛教時間爲 15 分、30 分、45 分及以個別與團體衛教模式，其衛教成本及臨床效益的差異性爲何？本研究設計爲類實驗性，採隨機分配選取個案，隨個案至門診就診的順序分配於個別衛教組及團體衛教組及衛教時間分別爲 15 分鐘、30 分鐘及 45 分鐘各組。收案場所爲台北市南區一所 600 床的區域級教學醫院，入選條件爲 1.門診病患，初次診斷爲高血壓者，2.具國、台語表達能力者，3.具國小以上學歷者，4.願意參與所規劃的衛教活動及追蹤調查者。資料收集的時間爲於門診就診衛教時及衛教後三個月後。本研究工具爲高血壓健康知識量表，經專家效度後，內容效度指標達 80% 以上，而信度 alpha 值達 0.65，顯示量表具有適當的內容一致性。本研究結果顯示，不同的衛教模式在成本方面，顯示以衛教以 15 分鐘、團體衛教模式成本最低；每人平均每小時約 8 元，而以 15 分鐘、個別衛教模式成本最高；每人 平均每小時約爲 203 元。且對於高血壓健康知識方面，雖然在衛教前後得分均有增加（個別組增加 2.17 分；團體組增加 3.32 分），但並未達統計意義（p>0.05），至於衛教前後血壓值變化，無論在收縮壓與舒張壓上，衛教後都比衛教前降低，個別組收縮壓降低約爲 19 mmHg；團體組約爲 26mmHg；而舒張壓在個別組約降 12mmHg，團體組約降 12mmHg。在衛教時間長短方面，個別組無論在 15 分鐘、30 分鐘或 45 分鐘組，其高血壓健康知識上並無統計上顯著差異（p=0.16、0.20、1.00），但在團體衛教組上，則只有 15 分鐘組在高血壓健康知識上有統計上之顯著差異（p=0.04）。然而在血壓控制上，則衛教前後其收縮壓與舒張壓值都顯示明顯差異（p<0.05）。本研究結果在成本效益考量下，建議採團體、15 分鐘衛教較爲經濟效益。未來無論是醫院或中央健保局應可以本研究結果爲決策參考以提昇門診高血壓病患照護品質。		

- 英文摘要

The purpose of this study was to analyze the group and individual education models and time (15 minutes, 30 minutes, and 45 minutes) differences in costs and clinical effects for hypertensive patient education by a nurse under optimum outpatient visit regulation. This study design was randomized controlled trial. Samples were randomized grouped into individual or group education models and in 15 minutes, 30 minutes, and 45 minutes groups. Data were collected at a southern district teaching hospital with 600 beds in Taipei area. The criteria for inclusion were as follows. 1. Be outpatient patients and primary diagnosed as hypertension in six months, 2. Can communicating with Taiwanese or Chinese, 3. At least had elementary school education, 4. Willing to participate in this study and follow-ups. Two time periods were used to collect data. One was at the time of samples visited the outpatient department and after three months of receiving patient education. The hypertension knowledge questionnaire was used as an instrument in this study and tested with validity of the CVI was greater than 80%, and with reliability of the alpha equal to 0.65. The results indicated that the mean costs per hour per person in 15 minutes group education program was 8 New Taiwan Dollars (NTD), in contrast, 15 minutes individual education program was the most costly program about 203 NTD. Although the scores of hypertension knowledge increased 2.17 in individual education model and 3.32 in group education model, however, no significant difference was found ($p>0.05$). For the blood pressure changes, both systolic and diastolic were reduced in individual education model and in group education model; reduced systolic blood pressure 19mmHg in individual education model and 26 in group education model, reduced diastolic blood pressure 12 mmHg in both individual and group education models. In different time zone, regardless time differences, there was no significant difference in individual education models, 15 minutes, 30 minutes, and 45 minutes ($p=0.16$, 0.20, 1.00, respectively), but significant difference was found only in 15 minutes group ($p= 0.04$). However, a significant difference was found for both systolic and diastolic blood pressure before and after receiving education ($p<0.05$). The findings suggest that group education model with 15 minutes was the most cost-effective for hypertensive patients under cost consideration. In the future, hospital and the National Health Insurance administrators can use the information of this study in decision-making and in improving the quality of patient care.