• 系統編號	RG9802-0162		
• 計畫中文名稱	我國長期照顧管理中心運作現況與未來發展之評估研究		
• 計畫英文名稱	--		
• 主管機關	行政院衛生署	• 計畫編號	DOH97-TD-M-113-97020
• 執行機構	台北醫學大學護理學系		
• 本期期間	9703 ~ 9802		
• 報告頁數	137 頁	• 使用語言	中文
• 研究人員	陳靜敏；蕭？伶；周桂如；黃斯蘋；； Chen Ching-min；Hsiao, Yu-Ling；Chou, Kuei-ru；Huang, Si-ping；；		
• 中文關鍵字	長期照顧管理中心；運作成效；服務模式；政策建議；；；；		
• 英文關鍵字	Long-Term Care Management Center,；Effectiveness,；Service Model,；Policy Recommendation；；；；		
• 中文摘要	本研究旨在調查我國長期照顧管理中心運作現況與研究未來發展。研究設計採多元方法，研究步驟及結果包括：（一）透過文獻查詢了解世界各國照管中心之運作模式與長期照護人力之需求與照顧管理之相關政策，擷取重要國內外文獻各 65 及 75 篇並整理爲簡易摘要。（二）發展訪談指引，透過深入訪談 7 個中心之照顧管理督導及專員共 11 人，進一步瞭解實務工作者對中心運作之意見與觀感。訪談所得結果皆完成逐字稿，進行內容分析歸納出「體察個案管理服務對於實務的衝擊」、「察覺個人專業能力的重要性」、「察覺妾身不明與未來的不確定感」與「體察業務推動過程的阻力」四個主要概念。（三）普查現任照管專員共 253 人，回收 196 份有效問卷。結果顯示專員的人力素質佳、但服務的年資並不長；礙於多爲臨時性職缺，未來留任意願僅 65.31%；依 Donabedian 模式預測，中心在結構、過程與結果面三者皆呈現相關性，因此建議在結構面需要有完善的組織架構、充足的設備、多元化的資源種類及適當的在職教育，就能使專員在過程面執行個案管理更順利，使組織的運作更好，就會使結果面的工作困擾降低及提昇其留任意願。（四）藉由專家諮詢會議提出最適之組織定位與運作模式之建議，專家一致認爲中心應爲官方單位，但因應地方特性，不一定需爲二級機關。而中央應定位爲規劃者、推動者、及考核者，以指引地方。以單一窗口方式由專員運用個案管理的方式針對複雜或多元需求之個案進行整合性、套裝式服務計畫及連結多元之資源爲適切之中心運作模式，但目前規劃的負荷量則不可行，建議應先經初評：穩定個案爲 120-200，但複雜者即爲 45/專員。藉由本研究深入了解管理中心運作之策略、現況、問題與成效，期望能提供政府相關單位作爲評量中心運作成效之依據，並可作爲未來在制定相關政策之參考。		
• 英文摘要	The purpose of this study is to examine the current operation status of long-term care management centers and further aimed to suggest the future policies for directions and service models. The triangulation approach was utilized. Research methods and results were as followed. 1). The thorough literature review		

was meta-analyzed, and 65 and 75 references in Chinese and English were annotated. 2). Based on results of literature review, interview guild was developed, 11 care managers and supervisors were interviewed in 7 centers. Results of content analysis indicated “impact of delivering case management in practice”, “awareness of professionalism”, “awareness of vague position and uncertainty” and “difficulties of promoting practice” were conducted. 3). A total of 253 case managers currently working were surveyed. In general, the personnel quality was good, work experience was not long, the temporary work status lead to low retention intention. As the Donabedian model predicted, if the staff level of structural organization was enough; the organization regulation was clearly, the equipment was sufficient and the information was appropriate, community resources was diversiform and sufficient, that would make care managers lower their work obsession. 4). expert consensus meeting was held to analyze current operation of the centers and further to propose the appropriate service model for the centers. Experts all agreed that the center should be funded by government with authority power. The Central government should be the planner, facilitator and evaluator for implementing the long-term care in every cities/counties. The single entry approach enabled care managers to case manage those in needs and further to delivery appropriate care. However, the current proposed caseload for managers was impossible under this service model. Screening to divide cases into 2 different types of caseload was recommended.