

出國報告(出國類別：參加國際會議)

**2009 年國際護理協會第 24 屆會議
「ICN 24th Quadrennial Congress」
出國報告**

服務機關：行政院衛生署護理及健康照護處

姓名職稱：蔡淑鳳副處長

派赴國家：南非

報告日期：2009 年 6 月 30 日、7 月 10 日

出國時間：2009 年 6 月 26 日至 7 月 5 日

摘要

本次出國目的是參與 2009 年國際護理協會第 24 屆會議，並於會中口頭報告『台灣護理政策發展』與『護理法規』。

本次會議主辦地點是南非德班，時間是 6 月 30 日至 7 月 3 日，此次與會國家約有 100 多國，出席人數高達 5000 人。台灣這次參與非常踴躍，共有 312 篇投稿審核通過，其中有 25 位口頭報告，289 位海報展；其中有 142 位報名出席，出席中有 19 位作口頭報告，116 位參加海報展。

24th ICN Quadrennial Congress 國際會議主題是：『引領改變，建立更健康的國家(Leading Change :Building Healthier Nations)』，相關十項主題包括了 The Nursing Workforce、Pandemics/Disasters、Ethics/Human Rights、Clinical Care and Patient Safety、Nursing Education and Learning Environment、Advocacy/Lobby/Legislation、Care System、Technology/Innovations/Informatics、Leadership/Management/Regulations 等。

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本文

壹、目的：

本次出國目的是參與 2009 年國際護理協會第 24 屆會議，並於會中口頭報告『台灣護理政策發展』與『護理法規』。

貳、過程

一、 國際護理協會(International Council of Nursing, ICN)

世界衛生組織相信護理對人類健康貢獻的獨特性與重要性，為支持護理助產發展的促進，建立全球化護理網路平台，透過護理社群國際性聯結形成夥伴聯盟，以促進健康與預防疾病。

國際護理協會(International Council of Nursing, ICN)是世界衛生組織四大醫藥公共衛生專業團體之一，該組織是以護理團體作為會員認證單位，目前約有 138 會員國，代表全世界百萬護理人員，其重要任務工作包括參與世界衛生組織之健康政策發展及設定護理專業發展之年度議題，並透過各種平台，引領世界護理貢獻人類健康促進與照護服務。ICN 每 4 年輪流於世界各國召開大會，2005 年在台灣舉辦第 23 屆大會，2009 年在南非舉辦第 24 屆國際護理大會，目的是促進不同文化間之護理及助產專業間的交流及經驗分享。

二、 會議內容：

本次出國目的是參與 2009 年國際護理協會第 24 屆會議，並於會中口頭報告『台灣護理政策發展』與『護理法規』，報告內容如(附件二)。

本次會議主辦地點是南非德班，時間是 6 月 30 日至 7 月 3 日，此次與會國家約有 100 多國，出席人數高達 5000 人。台灣這次參與非常踴躍，共有 312 篇投稿審核通過，其中有 25 位口頭報告，289 位海報展；其中有 142 位報名出席，出席中有 19 位作口頭報告，116 位參加海報展。

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家(Leading Change :Building Healthier Nations)』，相關十項主題包括了 The Nursing Workforce、Pandemics/Disasters、Ethics/Human Rights、Clinical Care and Patient Safety、Nursing Education and Learning Environment、Advocacy/Lobby/Legislation、Care System、Technology/Innovations/Informatics、Leadership/Management/Regulations 等。

三、會議地點簡介

南非面積 1,219,912 平方公里，約有 47,400,000 人口，印度後裔就佔了四分之一。南非位於非洲南部，東南濱印度洋，西濱大西洋，北接納米比亞、波札那、辛巴威及莫三比克。本次會議地點是南非東南邊的德班，德班（Durban）是多元文化與多元種族的都市，是祖魯族人較集中的地方，也是南非最多印度裔的地方，是非洲第一大港，也是世界排名前十名的商港。夸祖魯（KwaZulu）是原住民土著的話，意即「美麗的草原」，而「納塔爾」則是葡萄牙人的稱呼，原意是指聖誕節，因為葡萄牙人是在 1497 年的聖誕節當天發現了德班港，葡萄牙人稱當時的德班港叫「納塔爾」。英國人從 19 世紀起逐漸接收葡萄牙人和荷蘭人在南非的港口，1856 年，納塔爾獨立建省後，當時的省長就以自己名字，替這座港口城市取名德班，沿用至今。

四、ICN 理事推選

這次大會活動還包括 ICN 理事長與理事競選，台灣代表的會員組織是台灣護理學會，而台灣護理學會則推薦尹祚芊理事代表參選，行政院外交部與本署國合處也分別補助經費支持學會的國際參與，這次近有 200 位護理人員與家屬出席會議並積極參與輔選，值得慶賀的是尹祚芊理事也不辜期待，當選理事及副理事長。

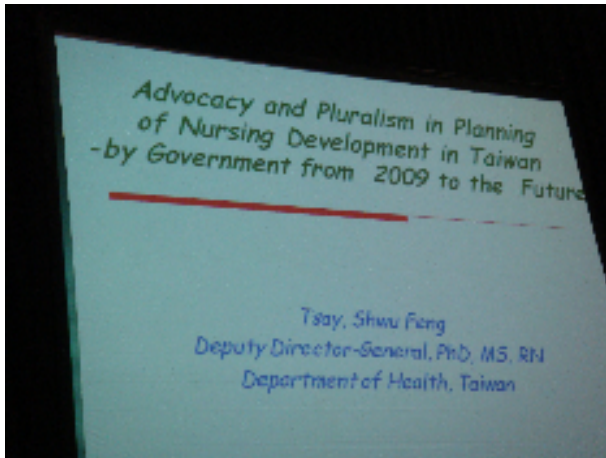
參、心得

- 一、這次有機會出席口頭報告，不但自己學習很多，更增加了台灣的可見度；觀察其它與會出席人員都以非常積極的發言及提問方式參與，讓人印象深刻。
- 二、整體而言，會議運作非常多元化，非常有益於雙邊、三邊或多邊的國際交誼。
- 三、這次分享其他國家的報告發現，台灣護理專業發展並不遜於其他國家，而台灣護理如何增加可見度，以成為國際邀請的報告國家，是可以努力的願景。
- 四、整體而言，台灣護理政策面臨的挑戰與其他國家、甚至是先進國家，皆大同小異，但我們有我們的特性與差異，如何「前瞻國際與在地行動」，引領台灣護理為台灣人民健康作更大貢獻，留任更優秀人才從事護理工作是未來努力的方向。
- 五、會議住宿、會議地點與活動安排的週遭環境雖然臨海港，但因為治安問題，無法安全行走在旅館前面的美麗海岸，只能從窗戶欣賞，非常可惜。也可作為未來國際會議的參考，會議地點選擇應考慮讓國際友人不只是參加會議，也可融入異國文化，交流文化特色

肆、建議事項

- 一、因為本次是大型會議，很難聚焦，但卻是一個多元的觀察。國際會議的設計或許也可以就議題需要，有小型圓桌與深度議題的會議方式設計，以促進與會人員的可見度、參與度與互動討論，以利多元觀點與不同國家經驗作交流與交換，而且因為會議主軸議題的聚焦與深度討論，會讓與會人員的國際會議經驗更加深化。
- 二、全球化時代來臨，政府代表不應在國際護理缺席。這次會議相關衛生署單位只有照護處代表出席 ICN 會議並作口頭報告(是第一次)，及一位署立嘉南療養院護理主任參與海報展出。而從這次經驗我深刻體會為什麼參與國際會議是銜接國際知識、人才、與資源最有效率的方法之一。過去政府補助相關專業團體出國經費很多，但因為補助原則限制，反而政府行政人員不容易出國參加會議，形成政府與學界或產業國際人才的嚴重落差，是值得未來政府人才培訓計畫的參考。

伍、照片分享



Advocacy and Pluralism in Planning of Nursing Development in Taiwan -by Government from 2009 to the Future

*Tsay, Shwu Feng
Deputy Director-General, PhD, MS, RN
Department of Health, Taiwan*

Purpose of the Presentation

- It is to stress how we apply the advocacy and pluralism strategy in planning to designing a meaningful and feasible nursing system by government and working with nursing partnership to pursue a promising nursing career for nurses

Outlines of Presentation

Nursing in Taiwan

Advocacy and Pluralism in Planning of nursing development :

- 1.The Evidence-based Nursing Practice
2. The Nursing Leadership in LTC Facilities
- 3.The Consensus on Advanced Nursing Practice Model

Conclusion

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Nursing in Taiwan



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What is Nursing

Nursing is giving
with great love in
natural ways when
people are in need



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Task of Nursing Leaders

To train nursing
leaders to go well
beyond us in their
ability to commit the
future nursing life



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The Challenges of Nursing in Taiwan

- Changing Environment in Health Care
- Disproportion of Nursing Workforce
- The Level of Dissatisfaction in Nursing Career

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The Challenges of Nursing in Taiwan(a)

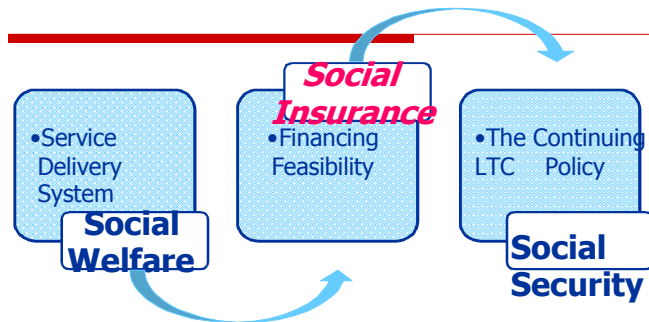
Changing Environment in Health Care

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The Priority of Policy Agenda in 2011

Long-term care and insurance



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Rapid Aging of Population

Country	The year that the population percentage of age 65-and-over					Boasting period (year)	
	7%	10%	15%	20%	30%	7%~15%	10%~20%
France	1864	1943	1995	2019	-	131	76
Sweden	1887	1948	1975	2011	2041	88	63
Italy	1927	1966	1990	2008	2033	63	42
England	1929	1946	1980	2020	-	51	74
Germany	1932	1952	1976	2010	2035	44	58
USA	1949	1967	2015	2030	-	66	63
Japan	1970	1985	1996	2006	2038	26	21
Taiwan	1993	2005	2019	2025	2040	26	20

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The Challenges of Nursing in Taiwan (b)

Disproportion of Nursing Workforce

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Distribution of Nursing Workforce

- Licensed nurses : 210,000
- Practice nurses: 130,000
- 90% of nurses are in clinical areas
- 3.5% of nurses in the community health care
- 4 % of nurses in LTC facilities

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The Challenges of Nursing in Taiwan (c)

Dissatisfaction of Nursing Career

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The Problem of Retention

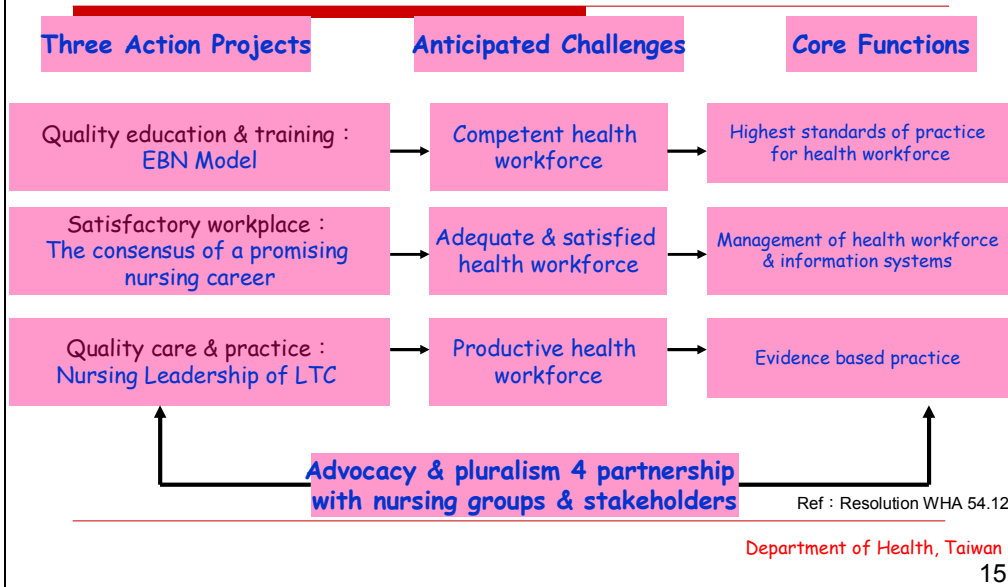
In hospitals

- Nurses aged 25-29yrs(30%) ;
30-34 yrs(25%)
- The average working life of hospital nursing is 5-7 yrs
- Newly recruited nurses: 16%
- Turnover rate per year: 13 % (<1 yr)
- Turnover rate per year: 8% (<3 months)

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Challenges & Strategy Planning



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A Promising Nursing Career

Clinical Nursing Practice

Advanced Nursing Practice Model

Hospital: Nurse practitioner, nurse chief

Community: The entrepreneurship in LTC facilities

Education: Academic and preceptor

Administration: Policy-maker in Public Health.....

Research: Nurse researcher.....

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*Advocacy and Pluralism in
Planning of Nursing Development:
Three Action Projects*

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*Three Action Projects
-for a Promising Nursing Career*

1. The Evidence-based Nursing Practice
2. The Nursing Leadership in LTC Facilities
3. The Consensus on Advanced Nursing Practice Model in Taiwan

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The Evidence-based Nursing Practice (EBN)

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Goals

- ❑ To develop clinical guidelines based on EBN research
- ❑ To build up an educational program
- ❑ To promote the climate of EBN: research, education, leadership, long-term care, and nursing care

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Methods

- To set up an EBN's task force
- To develop a training program
- To establish clinical guidelines
- To build up a national platform for EBN

2009's Outcomes (a)

- Prepare EBN core members (65):
Nurses have the competence in establishing clinical guidelines
- Prepare EBN teachers (10):
Teachers have the competence to teach EBN core members

2009's Outcome (b)

- Establish EBN learning materials (24 clinical guidelines)
- 65 trainers have completed the program
- Establish EBN continuous educational institutes (12), training workshops(4), and nursing participants(800)

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The Nursing Leadership in Long-Term Care Facilities (LTC)

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Goals

- For LTC participation
- To promote nursing leadership of LTC facilities
- To respond to the aging social needs

Methods

- To conduct researches in core-competence for nursing leadership of LTC facilities
- To develop an educational program LTC nursing leaders
- To develop a certification for LTC facilities

Outcomes

- In 2009, 1948 nursing leaders will complete the educational program of LTC
- In the future, we will have 10,000 qualified nursing leaders for LTC facilities (1leader/2500 people/community)

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The Consensus on Advanced Nursing Practice Model in Taiwan (ANP)

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Goal

- To build up an advanced nursing practice model: education, licensure, examination, and accreditation

Methods

- To construct a platform for nursing leaders from the representatives of the 50 nursing groups
- To conduct a national survey to get a consensus of ANP model

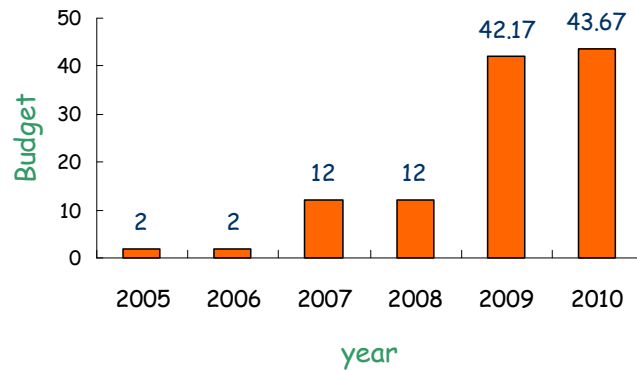
Expected outcomes

- ❑ To complete a proposal of ANP model
- ❑ To build up an attractive and diversified career of nursing professional for nurses in Taiwan

Conclusion

- ❑ Challenges: are also opportunities
- ❑ Solutions: are diversified/multifaceted
- ❑ The role of the government: is to provide continuing support

The Roles of Government



Budget Unit : per million US dollar

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Be Continuing

By enhancing the involvement of nurses in the integrated planning of human resources for health needs, and respecting advocacy and pluralism strategy planning, then we can maintain appropriate numbers of competent nursing personnel

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Thanks for your attention

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The Challenges of Nursing Regulation in Taiwan

Tsay, Shwu Feng PhD, MS, RN
Deputy Director-General, Department of Health, Taiwan

Outlines of Presentation

- Nursing in Taiwan
- Current Challenges On Nursing Regulation
- The Strategic Planning for the Impacts

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Nursing in Taiwan

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Development of Social Insurance Programs in Taiwan

- 1950 Laborer's Insurance
- 1958 Government Employee's Insurance
- 1985 Farmer's Insurance
- 1990 Low-income Household Insurance
- 1995** National Health Insurance (NHI)
- 2011** National Long-term Care Insurance

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Distribution of Nursing Workforce

- Licensed nurses :210,000
- Practice nurses:130,000
- 90% nurses in clinical areas
- 3.5% nurses in community health care
- 4 % nurses in the LTC facilities
- 2.5%(1751) nurse Practitioners in hospitals
- 1% male nurses, 99% female nurses

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The Retention Issue of Nursing Workforce

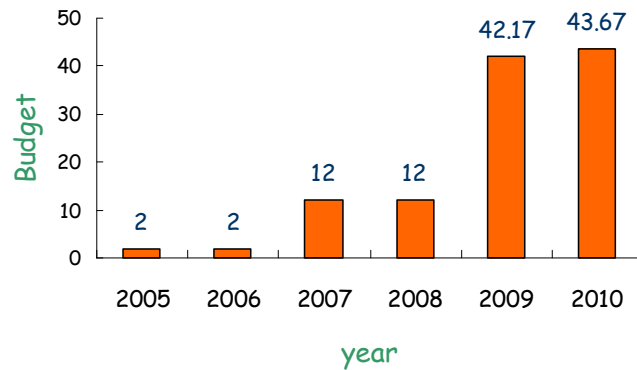
In hospitals

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25% 30-34 yrs
- The average working life
of hospital nursing is 5-7 yrs
- New recruited nurses: 16%
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The Role of the Government



Budget Unit : per million US dollar

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The Achievements of Nursing Regulations

- The core entitlement principle of nursing regulation is Nursing Personnel Law which was promulgated in **1991**
- The Standards for Classification and Establishment of Nursing Institutions was enforced in **1993** that nurses can practice independently

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The Achievements of Nursing Regulations

- In 2004, the regulation governing the specialties and examination of nurse practitioners were enforced
- Nursing License Renew began in 2008, certificate renew criteria is valid within 6 years

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Act of Nursing Personnel Management

- **General:** Qualification rules
- **Practice:** regulation of practice registration, continuing education, participation in local association and rules to reissue certificates
- **Obligation**
- **Sanction:** requirements, methods,
- the establishment of sanction committee, and rules of penalty
- **Professional Society**

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Current Challenges On Nursing Regulation



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Current Challenges (I) :

The Practice Scope of Nurse Practitioner(NP)

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Credential system for NP

A NP should :

- Be issued a registered professional nursing certificate based on his/her nursing qualification
- Complete NP training by NP training hospital
- Pass the national examination, writing and oral tests, conducted by Department of Health

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Results on the Examination of NP

Filed		Paper-and-Pencil exam		
		Examine	Passed No.	Passed rate (%)
2006	Medical NP	906	350	38.6
	Surgical NP	756	232	30.6
	Total	1,662	582	35.0
2007	Medical NP	1,008	247	24.5
	Surgical NP	1,073	425	39.6
	Total	2,081	672	32.3
2008	Medical NP	1,029	193	18.8
	Surgical NP	893	304	34.0
	Total	1,922	497	25.9
Total		5,665	1,751	30.9

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Purposes of Establishing NP System

- To upgrade the quality of medical services and prevent and reduce medical errors
- To improve collaboration between physician-nurse team work
- To readjust patient care tasks shared between physicians and nurses

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Purposes of Establishing NP System

- To improve physician-patient and nurse-patient relations
- To establish a national standard for training programs and licensure systems for NP to ensure the high level of NP competencies

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The Practice Scope of NP

- Services provided by nursing personnel act as follows:
 - 1) Nursing assessment of health problems
 - 2) Nursing measures for preventive care
 - 3) Nursing guidance and consultation
 - 4) Medical assistance
- Medical assistance shall be conducted under the direction of a physician

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The Divergence of Practice Scope

- Promulgation of a revision of "Medical Care Act" in 2004
 - Article 58 : A medical care institution shall not establish clinical assistant to conduct the medical practice
- The divergence of the practice scope of NP

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Current Challenges (II)

- Globalization and nursing immigration
 - Conducted an impact evaluation research of globalization and immigration on nursing in Taiwan, 2007-2008

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Methods

- The participants were 34 focus groups, who were the nursing personnel of the nursing department of 8 medical hospitals from different parts of Taiwan
- The interview guide was drafted based on the push-pull theory and results were statistically analyzed
- The study also gathered data from two undertakers of the organizations who helped the nurses for overseas registrations, tests, training, etc
- Through cluster sampling, 397 samples were recruited from three nursing units of each hospital randomly

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Findings

- The meaning of globalization from nurses in Taiwan is: open-minded, beyond region, shaped and planned the inherent environment, and reciprocally ongoing
- In Taiwan, economics is the main push and pull factor for the nurse immigration, and social factor is the main reason for moving back. Job information from global sources is the main need for immigrated nurses

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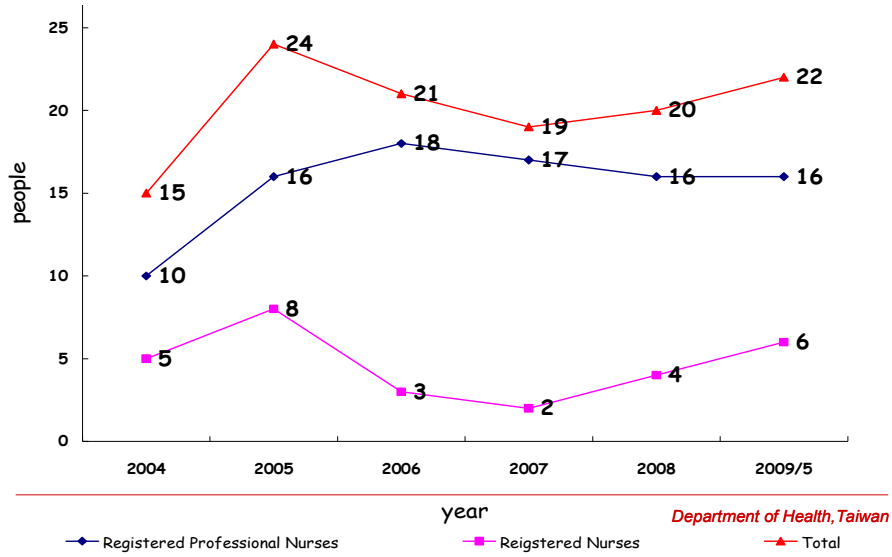
Findings

- More than 50% of respondents think the government and the nursing professional organizations should control/regulate the nurses' moving- out and moving-back of set purposes
- By estimation, roughly 0.9% (N=1,026) of nurses are working abroad per year
- Government and the professional organizations should set the **open porch** to lead immigration for nurses effectively and efficiently

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Foreign Nurses working in Taiwan



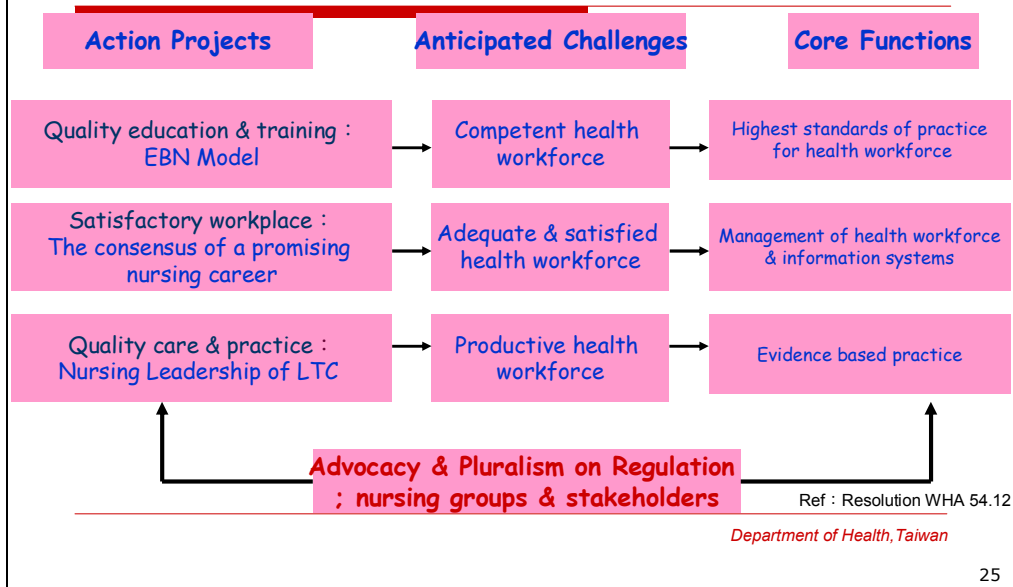
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The Strategic Planning for the Impacts

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Nursing Policy in Taiwan



Impacts: Article 24

- One of the duties of nursing personnel includes auxiliary medical care. It shall be performed under the instruction of a physician

- Impact: What are consensus and details on the practice scope for nurse practitioner?

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Impacts: Article 1 & Article 55-3

□ Article 1:

Citizens of Taiwan, the Republic of China who pass the Nursing Personnel Examination and obtain the Nursing Personnel Certificate may work as nursing personnel

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Impacts : Article 1 & Article 55-3

□ Article 55-3:

Foreign and overseas Chinese who pass the nurse qualification examination and acquire the nursing license, in practicing the functions of nurse in Taiwan shall have the permission of the central competent authority

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Impacts : Article 55-3

□ Impact:

What is the the trade-off between the benefits from resource and destination sides about nursing migration

Be Continuing

By enhancing the involvement of nurses in the integrated planning of human resources for health needs, and respecting advocacy and pluralism strategic planning on nursing regulation, then we can maintain appropriate numbers of competent nursing personnel

Thanks for Your Attention

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