2026 第 7 屆台日職能治療論壇

一、主辦單位：

社團法人臺灣職能治療學會、日本作業療法士學會、中山醫學大學職能治療學系

二、簡介：

臺灣職能治療學會於 2016 年 11 月與日本作業療法士協會 (Japanese Association of Occupational Therapists, JAOT) 達成兩會持續於學術與實務方面交流之共識，希望透過兩會的交流提升雙方職能治療之服務品質，給予個案更全面之照護服務。兩會同意每兩年舉辦台日職能治療論壇，以落實資訊及經驗之交流及分享。

2026 年台日職能治療論壇將於社團法人臺灣職能治療學會 2026 年第 20 屆第 2 次會員大會暨第 45 次學術研討會期間舉辦。本屆論壇將聚焦於「失智症的職能治療 (Occupational Therapy Services for Dementia)」及「司法職能治療 (Forensic Psychiatry and Occupational Therapy Services)」兩大主題，由臺灣及日本專家分享兩國於相關領域之臨床服務、制度發展及實務經驗。2026 年台日職能治療論壇將以「失智症的職能治療」及「司法職能治療」為主題，邀請臺灣及日本講者分享兩國在相關領域之服務現況、臨床經驗與未來展望。

第一個主題「失智症的職能治療」，由日本 Mr. Ishimaru Daiki 及臺灣許庭榕兩位職能治療師進行分享。日本經驗將介紹失智症診斷後早期支持中職能治療師的角色，包括如何縮短診斷至正式照護服務介入之間的「空窗期 (Blank Period)、連結社區支持資源，以及透過居家評估與個別化介入協助失智症者維持日常生活功能；臺灣經驗則以「今牌人生牌卡(Live for Today: Cognitive Card Set, LFTCS)」為例，分享結合藝術與失智照護之認知促進工具的發展、初步應用及推廣經驗。第二個主題「司法職能治療」，由日本 Mr. Hajime Adachi 與臺灣成冠緯兩位講者進行分享。日本經驗將介紹職能治療於司法及矯正領域的發展，包括監所中個別化支持、預防次發性障礙，以及出獄後社區支持等未來發展方向；臺灣經驗則以司法精神醫療之臨床實務為基礎，介紹職能治療如何結合社會認知、職能表現及復元導向評估，建構由治療、出院準備至社區融合的復元路徑。

期待透過此次論壇，使與會人員更深入了解臺、日兩國在失智症照護及司法職能治療領域之服務現況與發展，並藉由雙方臨床經驗與實務模式之交流，拓展職能治療在不同服務場域中的專業角色與可能性，持續以「職能」為核心，促進個案的生活參與、健康福祉及社會融合。

三、日期：2026 年 10 月 31 日(星期六) 下午 13:30-17:10

四、課程地點：中山醫學大學正心樓一樓 0112 教室

五、參加對象：職能治療師及相關專業人員

六、人數上限：150 名

七、報名方式：

1、 線上報名，先報名後再繳費，未繳費者恕不受理。

2、 報名連結：https://www.ot.org.tw/index.php?action=physical-course-apply&id=168

3、 報名期限：115 年 09 月 01 日起至 10 月 26 日止

4、 費用：本學會會員-1,000，JAOT 會員-1,000，非會員-1,200

5、 繳費方式：代碼 006-合作金庫虛擬帳號 1347114 身分證字號後 9 碼(不含英文)，共 16 碼。例如：學員身分證號為 A123456789，繳款帳號則為 1347114123456789

八、教育積分：本會將依學員實際參加時數發給出席證明。本會經行政院人事行政局核准為公務人員終身學習之學習機構，可認證學習時數。全程參與者，核給職能治療師繼續教育積分 2.4 點。

九、課程負責人：本會繼續教育委員會李冠逸主委

十、本會負責人：周映君理事長

本會聯絡人：張婉嫈秘書長、黃上育副秘書長、黃千瑀副祕書長、柯瑋婷副秘書長、彭宜屏秘書、蔡宛芳秘書、劉祐成秘書

電　　話：(02)2382-0103　傳真：(02)2382-6496

會　　址：臺北市中正區博愛路 9 號 5 樓之 3　E-mail：tota@ot.org.tw

網　　址：www.ot.org.tw

台日職能治療論壇議程

時間	活動內容	主持人/主講人
13:30-14:00	報到	報到組
14:00-14:10	開幕致詞	主持人：張家妤理事 致詞者：臺灣職能治療學會周映君理事長 日本作業療法協會理事長 Shinichi Yamamoto（山本伸一）
14:10-15:10	失智症的職能治療：台日經驗	座長：蔡宜蓉主委 主講人： 日本代表：Mr. Ishimaru Daiki （石丸大貴作業療法士） 臺灣代表：許庭榕所長
15:10-15:25	中場休息	
15:25-16:25	司法職能治療：台日經驗	座長：詹佩穎主委 主講人： 日本代表：Mr. Hajime Adachi （足立一 兼任講師） 臺灣代表：成冠緯理事長
16:25-16:55	綜合討論	座長：詹佩穎主委 所有講者
16:55-17:10	閉幕式	主持人：張家妤理事 致詞者：臺灣職能治療學會周映君理事長 日本作業療法協會 Shinichi Yamamoto（山本伸一）

講者簡介與主題摘要

主題：失智症的職能治療：台日經驗

Speaker 1: 石丸大貴作業療法士 (Mr. Ishimaru Daiki)

Education:

2020	Ph.D. in Health Sciences, Graduate School, Osaka Prefecture University
2015	School of Comprehensive Rehabilitation, Osaka Prefecture University

Work Experience

Specially Appointed Researcher, Department of Psychiatry, Osaka University Graduate School of Medicine

November 2020~Present	Occupational Therapist, Department of Medical Technology, The University of Osaka Hospital / Department of Psychiatry, The University of Osaka Graduate School of Medicine

Abstract:

Japanese government has prioritized early diagnosis and support for people with dementia (PwD) to enable them to continue live in their familiar communities for as long as possible. Following the approval and introduction of anti-amyloid β antibody therapies in Japan, the timing of diagnosis has shifted earlier, leading to more opportunities to provide support for PwD at earlier stage. As for the early diagnosis and support, "Blank Period", the long period from diagnosis to initiation of care services, has been recognized as one of the major issues. For post-diagnostic early support, occupational therapists are expected to shorten the Blank Period by identifying the support needs and challenges faced by PwD and their families, while maintaining or improving their performance in activities of daily living (ADL) to enable safe and independent living in their communities during this period.

In response to these trends, the Japanese Association of Occupational Therapists (JAOT) supports occupational therapists' involvement in various community-based activities—such as informal activities and peer support cafés—to help PwD and their families maintain connections with their local communities even after diagnosis. The JAOT also offers systematic educational programs to ensure that occupational therapists acquire the knowledge and skills necessary for community-based practice.

For individual-based practice as a university hospital, our multi-disciplinary team including occupational therapists conduct home-visit assessments at early post-diagnosis period to detect subtle ADL declines and identify support needs. These assessments would be shared with community care /case workers to establish support systems for PwD and their families. Additionally, we provide tailor-made intervention or care instruction to increase the efficiency and safety in the ADL during the period until formal care services become available.

In this symposium, we will present the JAOT's community-based activities and the example of occupational therapy approach in our university hospital for post-diagnosis supports.

Speaker 2:許庭榕所長（Hsu, Ting-Jung)

Topic: Progress and Prospects of 'Live for Today: Cognitive Card Set (LFTCS)' in Taiwan Education

2018	M.S. (Master of Science), Department of Long-Term Care, National Taipei University of Nursing and Health Sciences

Work Experience

2026~present	Supervisor, Taiwan Mindful Care Association
2022~present	Director, Daoxiang Occupational Therapy Clinic
2018~2022	Occupational Therapist, uAge Day Care Center, Taipei Veterans General Hospital
2013~2022	Occupational Therapist, Center for Geriatrics and Gerontology, Taipei Veterans General Hospital

Abstract:

As Taiwan became a super-aged society in 2025, the prevalence of dementia among adults aged 65 and older reached 7.99%. With the growing prevalence of dementia, the quality of dementia care has received increasing attention. In light of the World Health Organization's 2019 report affirming the positive effects of the arts on health, well-being, and disease management, furthermore, studies showed that engagement in the creative aging activities may stimulate brain function for people with dementia. 'Live for Today: Cognitive Card Set (LFTCS)' is an innovative project that seeks to enhance cognitive function, communication, and social interaction for people with cognitive impairment or mild to moderate dementia.

LFTCS has made steadfast efforts to undergo the development process, outreach workshops and promotion:

1. **Cognitive Card Development:**
   Qualitative research and the KJ Method were employed. Artworks from the National Palace Museum's (NPM) collection were selected, followed by inductive analysis and focus group discussions. Drawing from 60 carefully selected artworks, the LFTCS was organised into 10 thematic categories. An artwork introduction booklet and a user manual were formulated.
2. **Pilot Study Phase:**
   Three elderly participants from a daycare center and five dyads from two dementia community services sites, each consisting of a person with dementia and their informal caregivers, were recruited. Preliminary findings revealed that the LFTCS depicting everyday life evoked personal memories, encouraging both reminiscence and engagement.
3. **Press Conferences Launch:**
   Two press conferences were held to officially launch the LFTCS, which was subsequently commercialized and made available for purchase.
4. **Outreach Training Workshops:**
   A total of eight workshops were conducted, engaging over 416 medical professionals and senior service providers across Taiwan.

Through the innovative project, interdisciplinary collaboration between medical care and the arts facilitated the implementation of the LFTCS in dementia care, enhancing its feasibility and availability. Moving forward, continued application of implementation science will be essential to support the LFTCS in reaching the sustainment phase.

主題：司法職能治療：台日經驗 (Forensic Psychiatry and Occupational Therapy Services)

Speaker 1: 足立一 兼任講師 (Mr. Hajime Adachi)

Education:

2010	Master's Degree in Academic Studies, Graduate School of Osaka Kyoiku University
1993	Qualified as an Occupational Therapist

Work Experience:

Managing Director, Fuku no Tane Co., Ltd.
Part-time Lecturer, Kochi Professional University of Rehabilitation

Abstract:

The number of occupational therapists (OTs) in Japan has increased rapidly, and the scope of their practice has expanded beyond healthcare and social welfare settings into community-based and forensic fields. One of the strengths of Japan's healthcare system is its capacity to provide high-quality care consistently across regions.

In recent years, the employment of OTs in forensic and correctional settings has increased. This development reflects the growing number of older incarcerated people and those with disabilities, as well as the significant challenge of occupational injustice associated with incarceration. To address these issues, the speaker has worked to promote change within prisons by analyzing and preventing secondary disabilities among incarcerated people and providing individualized support.

Following the introduction of the new "imprisonment" sentence in June 2025, greater emphasis is now being placed on individualized correctional treatment, further increasing expectations for the contribution of occupational therapists. Looking ahead, forensic occupational therapy in Japan has the potential to expand into post-release services and support for crime victims. This presentation will also introduce initiatives undertaken by the Japanese Association of Occupational Therapists in the forensic field.

Speaker 2: 成冠緯理事長 Chen, Kuan-Wei

Education

2021	National Taiwan University, Department of Occupational Therapy (PhD in Occupational Therapy)

Work Experience

2014~present	Director, Department of Occupational Therapy, Kaohsiung Municipal Kai-Syuan Psychiatric Hospital
2012~2013	Director, Community Rehabilitation Center, Kaohsiung Municipal Kai-Syuan Psychiatric Hospital

Abstract:

This presentation describes the development of forensic occupational therapy in Taiwan through the clinical experience of Kaohsiung Municipal Kai-Syuan Psychiatric Hospital, one of the country's major providers of court-ordered forensic psychiatric care. The presentation focuses on how occupational therapists are building practical recovery pathways within an evolving service system. It first outlines the Kai-Syuan model, including multidisciplinary assessment, staged treatment, violence reduction, functional restoration, discharge preparation, and community transition.

The presentation then examines how social cognition can inform occupational therapy practice with forensic psychiatric patients. Difficulties in recognizing facial emotions, understanding implied meanings, and applying social knowledge may contribute to interpersonal misunderstanding, conflict, and poor community adaptation. These domains are assessed using CAT-FER, COTIME, and CAT-SK, and are linked to social cognition groups, community adaptation training, legal education, emotional regulation, and interpersonal problem-solving activities.

Functional change is further monitored through SRG-PSP and COTEs, allowing therapists to consider both patients' self-perceived social functioning and observed general, interpersonal, and work-related behavior. Longitudinal clinical findings suggest gradual but uneven changes across social functioning, social knowledge, implied-meaning comprehension, selected emotion-recognition

domains, and general behavior. These results are interpreted as practice-based signals for refining intervention rather than proof of a single treatment effect.

Finally, the presentation introduces the translation and prospective application of the DUNDRUM Toolkit, particularly its potential to support discussions of treatment completion, recovery readiness, graded leave, step-down care, and community reintegration. By connecting social cognition, occupational performance, multidisciplinary observation, and recovery-oriented assessment, this presentation illustrates how forensic occupational therapy in Taiwan is moving from ward-based rehabilitation toward a more structured pathway to community life. The presentation also highlights opportunities for Taiwan–Japan dialogue regarding professional roles, assessment practices, recovery planning, and future collaborative research, while balancing individual recovery needs with public safety and service realities.