

宜蘭縣頭城鎮衛生所(A單位)社區整合型服務中心派案原則：  
1. 給予個案充足的服務資訊、依個案服務擇意願  
2. 服務人力及服務量能充足，可協助個案達成照顧目標者  
3. 提供即時性高  
4. 提供可近性高  
5. 在地資源  
※倘符合前揭原則，A單位亦得派案予自身之服務提供單位，符合上述各項要件不只一家時，則輪派。

至109年11月份宜蘭縣社區整合型服務中心(A單位)派案B單位情形

| 編號 | A單位<br>名稱         | A單位接受派案及在案情形      |                  |      |      |      |                 |          |          |          | B單位接受派案及服務情形                                        |            |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|----|-------------------|-------------------|------------------|------|------|------|-----------------|----------|----------|----------|-----------------------------------------------------|------------|------------|------------|-----------|-----------------|-----------|-----------|--|--|--|--|--|--|--|--|--|--|--|
|    |                   | 照管派<br>案量<br>(累計) | 實際在案量<br>(服務中個案) | 居服   | 日照   | 家托   | 社區式<br>交通接<br>送 | 專業服<br>務 | 交通接<br>送 | 喘息服<br>務 | B單位名稱                                               | 居服         | 日照         | 家托         | 專業服<br>務  | 社區式<br>交通接<br>送 | 交通接<br>送  | 喘息服<br>務  |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  | BA-1 | BB-1 | BC-1 | BD-1            | C-1      | D-1      | G-1      |                                                     | 人數<br>BA-2 | 人數<br>BB-2 | 人數<br>BC-2 | 人數<br>C-2 | BD-1            | 人數<br>D-2 | 人數<br>G-2 |  |  |  |  |  |  |  |  |  |  |  |
| 1  | 宜蘭縣<br>頭城鎮<br>衛生所 | 520               | 340              | 173  | 60   | 0    | 198             | 95       | 198      | 86       | 財團法人伊甸社會福利基金會附設宜蘭縣私立居家式長期照顧服務機構                     | 24         |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          | 財團法人一粒麥子社會福利慈善事業基金會                                 | 27         |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          | 財團法人弘道老人福利基金會附設宜蘭縣私立弘道居家式服務類長期照顧服務機構                | 30         |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          | 社團法人宜蘭縣社區照顧促進會附設宜蘭縣私立居家式服務類長期照顧服務機構                 | 55         |            |            |           |                 |           | 2         |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          | 社團法人宜蘭縣失智症照顧服務協會附設宜蘭縣私立惠眾居家長照機構                     | 34         |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          | (居家)財團法人宜蘭縣私立宏仁老人長期照顧中心(養護型)附設宜蘭縣私立奇仁居家式服務類長期照顧服務機構 | 8          |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          | 天主教靈醫會醫療財團法人附設宜蘭縣私立羅東聖母居家長照機構                       | 5          |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          | 財團法人天主教靈醫會附設宜蘭縣私立聖嘉民老人長期照顧中心(養護型)                   | 3          |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          | 財團法人天主教白永恩神父社會福利基金會附設宜蘭縣聖方濟居家式長照機構                  | 16         |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          | 財團法人天主教白永恩神父社會福利基金會附設宜蘭縣私立聖方濟新興社區式服務類長期照顧機構         |            | 26         |            |           | 26              |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          | 財團法人天主教白永恩神父社會福利基金會附設宜蘭縣私立聖方濟開蘭社區式服務類長期照顧機構         |            | 30         |            |           | 30              |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          | BD03-宜蘭縣頭城鎮衛生所                                      |            |            |            |           | 20              |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          | 宜蘭縣頭城鎮衛生所附設社區長照機構、 宜蘭縣頭城鎮衛生所附設居家護理所                 |            | 23         |            | 4         | 24              |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          | 財團法人宜蘭縣私立蘭陽仁愛之家(提供日間照顧服務)                           |            | 3          |            |           | 3               |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          | 永春物理治療所                                             |            |            |            | 1         |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          | 康齡宜安物理治療所                                           |            |            |            | 1         |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          | 好到家物理治療所                                            |            |            |            | 1         |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          | 臻宸物理治療所                                             |            |            |            | 0         |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          | 國立陽明大學附設醫院居家護理所                                     |            |            |            | 0         |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          | 禾樂居居家護理所                                            |            |            |            | 1         |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          | 醫療財團法人羅許基金會附設羅東博愛居家護理所                              |            |            |            | 1         |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          | 財團法人一粒麥子社會福利慈善事業基金會                                 |            |            |            |           |                 |           | 25        |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          | 財團法人宜蘭縣私立宏仁老人長期照護中心(養護型)                            |            |            |            |           |                 |           | 34        |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          | 社團法人宜蘭縣蘭雨社會福利協會                                     |            |            |            |           |                 |           | 36        |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          | 生通股份有限公司(宜蘭)                                        |            |            |            |           |                 |           | 34        |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          | 穩將小客車租賃有限公司                                         |            |            |            |           |                 |           | 34        |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          | 吳震世診所                                               |            |            |            |           |                 |           | 36        |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          |                                                     |            |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          |                                                     |            |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          |                                                     |            |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          |                                                     |            |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          |                                                     |            |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          |                                                     |            |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          |                                                     |            |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          |                                                     |            |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          |                                                     |            |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          |                                                     |            |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          |                                                     |            |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          |                                                     |            |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          |                                                     |            |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          |                                                     |            |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          |                                                     |            |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          |                                                     |            |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          |                                                     |            |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          |                                                     |            |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          |                                                     |            |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          |                                                     |            |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          |                                                     |            |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          |                                                     |            |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          |                                                     |            |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          |                                                     |            |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          |                                                     |            |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          |                                                     |            |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          |                                                     |            |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          |                                                     |            |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          |                                                     |            |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          |                                                     |            |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          |                                                     |            |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          |                                                     |            |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          |                                                     |            |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          |                                                     |            |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          |                                                     |            |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          |                                                     |            |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          |                                                     |            |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          |                                                     |            |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          |                                                     |            |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          |                                                     |            |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          |                                                     |            |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          |                                                     |            |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          |                                                     |            |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          |                                                     |            |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          |                                                     |            |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          |                                                     |            |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |
|    |                   |                   |                  |      |      |      |                 |          |          |          |                                                     |            |            |            |           |                 |           |           |  |  |  |  |  |  |  |  |  |  |  |