

**Annual Report  
St. Luke's College of Nursing  
WHO Collaborating Centre for Nursing Development  
in Primary Health Care  
2002**

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Dean, Head, WHO Collaborating Centre

WHO Collaborating Centre for Nursing Development  
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**Part I**

Work performed in relation to the terms of reference

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- (3) To update standards of nursing education and practice to implement primary health care
- (4) To facilitate research development relevant to nursing by identifying research priorities and developing research networks
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**Part II**

Research Abstracts

## Foreword

This centre was designated as a WHO Collaborating Centre for Nursing Development in Primary Health Care in May, 1990.

One of the terms of reference of this centre is the development of nursing models in Primary Health Care (PHC) in the developed country. PHC is the basic concept of the medical and health care activities. The most important point of PHC is that the people are center and health professionals are the partner of the people in the health care activities. We pointed out another three important points of PHC. They are the necessity of the education for health workers, the health care is acceptable in the culture of the area or the country, and all people can access equally to the health service. We described our center's activities of year 2002 from the view points of PHC.

The activities of our centre are nursing practice, nursing research, nursing education, international collaboration, and the political and administrative activities for the promoting these nursing activities in Japan.

This annual report is separated two parts. Part one is the annual report according to the terms of reference, and the latter is the abstracts of research papers concerning to the activities of our centre. Because of this construction is almost all of our research papers were written in Japanese, so the research outcomes were not shared in the world.

I hope to share the information about our activities and please let me know your comments for our future activities.

March 15, 2003

Head of WHO Collaborating Centre for Nursing Development in PHC

Dean of St. Luke's College of Nursing

Michiko Hishinuma



## Part I

Work performed in relation to  
the terms of reference

**(1) To develop and evaluate models for nursing in primary health care for an aging society in developed country**

Name of activity	Development of a systematic program for home care of children with chronic diseases or disabilities
Person in charge (Specialty)	Ikuko Oikawa (Pediatric Nursing)
Brief description of work implemented	A survey has been conducted on children's health status, living conditions and care providing system in a community to provide a basis for establishing a home-visiting care system.
KRA*	3, 4
Resources	The Ministry of Education, Culture, Sports, Science and Technology (Grant-in-Aid for Scientific Research “ KAKENHI”)

Name of activity	Development of care management for children receiving care at home
Person in charge (Specialty)	Ikuko Oikawa (Leader , Pediatric Nursing), Yumi Yokoyama (Pediatric Nursing)
Brief description of activity	A series of projects focusing on promoting home-visit care for children, a survey was conducted to identify the consciousness of professionals who work for home-visit care and welfare as to home-visiting nurse stations.
Brief description of work implemented	The research project (funded for three years) was completed in 2001. Based on results and evaluation of the care program, staff members are working to improve support for children receiving care at home.
Publications and other outcomes	The 49th Conference of Japanese Society of Child Health Nursing (See Abstract 1)
Plans	The results of this research will be further studied to provide suggestions to professionals who work for home-care for children.
KRA	3
Resources	Social Welfare and Medicine Organization Fund

Name of activity	Development of program to ensure the quality of home-care for child suffering from chronic disease and his/her family
Person in charge (Specialty)	Ikuko Oikawa (Leader, Pediatric Nursing) Yuko Hirabayashi (Pediatric Nursing)
Brief description of activity	The team organized the study group meetings with clinical pediatric nurses in the Kanto area to draft guidelines for children with asthma visiting the hospital for care as outpatient.
Brief description of work implemented	Care manual for asthmatic child visiting hospital as outpatient was prepared, which is used in

	some hospitals.
Publications and other outcomes	The 49th Conference of Japanese Society of Child Health Nursing (See Abstract 2)
Plans	An additional study will be started to evaluate and improve the care manual.
KRA	3
Resources	The Ministry of Education, Culture, Sports, Science and Technology (Grant-in-Aid for Scientific Research “ KAKENHI”)

Name of activity	Development of a day care model for cancer patients receiving adjuvant chemotherapy in the outpatient setting
Person in charge (Specialty)	Hiroko Komatsu (Adult Nursing)
Evaluation of activity/ Work implemented	Based on a basic research, the Day Care Program for promoting to breast cancer and adjuvant chemotherapy was developed. The content validity and appropriateness of this program were confirmed by a panel of clinicians.
Publications and other outcomes	First International Conference Japanese Society of Cancer Nursing (See Abstract 3)
KRA	3
Resources	The Ministry of Education, Culture, Sports, Science and Technology(Grant-in-Aid for Scientific Research “ KAKENHI”)

Name of Activity	Development and evaluation of a model for genetic nursing education
Person in charge (Specialty)	Naoko Arimori (Maternal & Midwifery Nursing)
Evaluation of activity/ Work implemented	The team provided three seminars on genetic nursing for clinical nurse specialists and conducted evaluations of the educational program.
Publications and other outcomes	International Society of Nursing in Genetics, the 15th Annual International Conference (See Abstract 4)
KRA	4
Resources	The Ministry of Education, Culture, Sports, Science and Technology (Grant-in-Aid for Scientific Research “ KAKENHI”)

Name of activity	Development and evaluation of nursing guidelines about domestic violence
Person in charge (Specialty)	Shigeo Horiuchi (Maternal & Midwifery Nursing)
Brief description of activity	The team is developing evidence-based guidelines to support perinatal women who may be experiencing domestic violence. After content evaluation by medical/nursing specialists as women's organizations, the guidelines will be

	used for nursing education about domestic violence.
Evaluation of activity/ Work implemented	The first draft of the above guidelines on domestic violence is being prepared. In the process of drafting, the related issues will be presented in academic meetings.
Publications and other outcomes	The 6th East Asia Forum of Nursing Scholars, 2003. 3. 7-8
Project period	2002-2005
Plans	The draft guidelines will be finalized with evaluation. Thereafter, the team will work to promote the use of guidelines as well as receiving evaluation on current program.
KRA	5
Resources	Ministry of Education, Culture, Science, Sports and Technology (Grant-in-Aid for Scientific Research “KAKENHI”)

Name of Activity	Development of home-visit nursing guidelines to promote the coordination between hospitals which are likely to recommend early discharge and community agencies
Person in charge (Specialty)	Hiromi Kawagoe, Hiroko Nagae, Masako Sakai, Toshie Miyazaki (Community Health Nursing)
Brief description of activity	Most hospitals are positive about decreasing length of hospitalization for patients. The team is preparing guidelines for transferring and coordinating care between hospital and home-visiting nurse stations.
Evaluation of activity/ Work implemented	Based on descriptions of good coordination between hospitals and home-visiting nurse stations, the coordination system was designed. From results of use in practice, the guidelines are being refined.
Publications and other outcomes	The 61st Conference of Japanese Society of Public Health, Japan Academy of Nursing Science 2002 (See Abstract 5)
Project period	2002-2003
Plans	The coordination guidelines will be completed within the fiscal year and be available on the internet through the home page of the Japanese Home-Visiting Nurse Association.
KRA	3
Resources	Social Welfare and Medicine Organization Fund

**(2) To identify and promote nursing leadership in primary health care**

Name of activity	Developing of on-the-job training program for visiting nurse (Joint project with Liaison Office of Tokyo's Home- Visiting Nurse Stations)
Person in charge (Specialty)	Hiromi Kawagoe (Community Health Nursing)
Evaluation of activity/ Work implemented	In this fiscal year, the team has been conducting on-the-job training course for home-visiting nurses who are members of the Liaison Office of Tokyo's Home-Visiting Nurse Stations. This educational program focuses on improving of the ability of new visiting nurses to solve problems in nursing practice.
KRA	3, 4
Resources	Liaison Office of Tokyo's Home-Visiting Nurse Stations

Name of activity	Infertility care network
Person in charge (Specialty)	Akiko Mori (Maternal & Midwifery Nursing)
Evaluation of activity/ Work implemented	At the end of October 2002, the Japan Infertility Care Network had 263 members. In 2002, three case study meetings were held in Nagoya, Tokyo and Kobe and one lecture was given in Tokyo. Three newsletters were published. During World Infertility Month 2002 in Japan, some staff members participated as counselors about infertility treatment.
Publications and other outcomes	The title of our survey of the members' needs (conducted in 2000) was in the program for the 58th Annual Meeting of American Society for Reproductive Medicine.
KRA	1
Resources	Not specified

Name of activity	Study of terminal care and spirituality of cancer patients in terminal stage
Person in charge (Specialty)	Noriko Iba (Adult Nursing)
Evaluation of activity/ Work implemented	In March 2002, the results of research were reported. The project has been completed
Publications and other outcomes	Now a paper is being prepared.
KRA	3, 4
Resources	The Ministry of Education, Culture, Sports, Science and Technology (Grant-in-Aid for Scientific Research " KAKENHI") (until March 2002)

Name of activity	Promotion and evaluation of a home care collaboration network for elderly
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Person in charge (Specialty)	Tomoko Kamei (Gerontological Nursing)
Publications and other outcomes	Home-visiting Care and Care-Providing, Bulletin of St. Luke's College of Nursing, No.28 ,2002 (See Abstract 6 )
KRA	3
Resources	Development Center for Longevity Society

Name of activity	Michigan-Japan network to promote an interdisciplinary team approach for support of the elderly (board member)
Person in charge (Specialty)	Tomoko Kamei (Gerontological Nursing)
Brief description of activity	1. Give advice and provide educational and training courses for the support of elderly people 2. Research on care support system for elderly people 3. International project on care support for elderly people 4. Promote interdisciplinary team approach for support of elderly people 5. Other project to achieve the aim of this network
Evaluation of activity	In 2002, provide seminars to promote team approach for the support of elderly people
Project period	Not specified
Plans	Provide seminars
KRA	2, 3

Name of activity	Tokyo GOLD Health Care Study Meeting
Person in charge (Specialty)	Tomoko Kamei (Gerontological Nursing)
Brief description of activity	Global initiative for chronic obstructive lung disease (GOLD)
Evaluation of activity/ Work implemented	Medical members who specialize in GOLD are asked to join seminars on a regular basis.
Project period	Not specified
Plans	Three seminars will be scheduled in a year.
KRA	4
Resources	Japan Boheringer Ingelheim

Name of activity	Research meeting on Respiratory Care at Home in Tokyo
Person in charge (Specialty)	Tomoko Kamei ( Gerontological Nursing)
Brief description of activity	Education and promotion of respiratory care at home
Evaluation of activity/ Work implemented	A seminar and a symposium were held during 2002
Project period	Not specified
Plans	Seminar and symposium will be held in 2003
KRA	4
Resources	Teijin Home-Care Medicine Co., Ltd.

**(3) To update standards of nursing education and practice to implement primary health care**

**1) Advancement of nursing education (national-level)**

Name of activity	Nursing education
Person in charge (Specialty)	Michiko Hishinuma (Dean, Fundamentals of Nursing)
Brief Description of activity	1) Work as a member of committee on nursing education and health education authorized by the Ministry of Education, Culture, Sports, Science and Technology 2) Work as a member of Nursing University Association in Japan (in charge of certification of educational programs for nurse specialists) 3) Work as a member of Private Nursing University Association in Japan 4) Work as a member of committee on nursing standards in the Japanese University Accreditation Association
KRA	4,5

Name of activity	National examination
Person in charge (Specialty)	Michiko Hishinuma (Dean, Fundamentals of Nursing)
Evaluation of activity/ Work implemented	Work as a member of the committee that conducts discussion and revision of national examination to certify community health nurses, midwives and nurses (under the authority of the Ministry of Health, Labour and Welfare). Her work contributes to up-grade, promotion and improvement of the quality of nursing education at the university level.
KRA	4,5

**2) Development of nursing education**

Name of activity	Defining and structure the meaning of the term “nursing” used in “Notes on Nursing” by Florence Nightingale
Person in charge (Specialty)	Michiko Ozawa (Fundamentals of Nursing)
Evaluation of activity/ Work implemented	Significance of words (Specifically, God, law, care, disease, health, nursing) “Note on Nursing was studied.
KRA	4
Resources	The Ministry of Education, Culture, Sports, Science and Technology (Grant-in-Aid for Scientific Research “ KAKENHI”)

Name of activity	Important elements of consolidating ability in integrated training program among students who took a gerontological nursing course
Person in charge (Specialty)	Wakako Kushiro, Fumiko Kajii and Tomoko Kamei (Gerontological Nursing)
Brief description of activity	The aim of our study was to improve gerontological nursing education by clarifying important elements of consolidation. Students who took a geriatric course and then have experienced nursing practice at the final year were studied.
Evaluation of activity	Analysis showed five elements of consolidation. For students who take more time to consolidate, weak elements need to be enhanced.
Publications and other outcomes	The Seventh Academic Conference of Japan Academy of Geriatric Nursing (2002) (See Abstract 7)
Project period	Between August 1, 2002 and October 31, 2002
Plans	The important elements of consolidation are further studied in more cases.
KRA	4

Name of activity	Development and evaluation of a training program for college student health volunteers
Person in charge (Specialty)	Junko Tashiro (Research Methodology & Theoretical Nursing)
Brief description of activity	Based on a survey on learning needs regarding nursing student health volunteers using focus groups, there was two major findings. First finding was that numbers of nursing student had experienced as volunteers when they are junior or senior high school students. Second one was that there were three areas of volunteer activities including hospital, home or community, and international field volunteer activities. The program for home care and international volunteers should be developed to guide nursing students properly. "Service Learning" was appropriate as a conceptual frame to develop a training program.
Publications and other outcomes	Health Care for Women International, 23:59-70,2002 (See Abstract 8)
KRA	4
Resources	The Ministry of Education, Culture, Sports, Science and Technology (Grant-in-Aid for Scientific Research "KAKENHI")

Name of activity	Development of an educational program for nurses who are transferring nursing technical knowledge to developing countries
Person in charge (Specialty)	WHO Collaborating Centre

Evaluation of activity/ Work implemented	In collaboration with National Medical Centre and National Nursing University, three-year project has been started from 2002. Our Centre has been studying on continued nursing education of international nursing specialists to develop a master course program.
KRA	3, 4
Resources	International Medical Research supported by The Ministry of Health, Labour and Welfare

### 3) Development of nursing practice

#### ① Drafting nursing standards and development of nursing system

Name of activity	"Pleasure experience" on the development in life from various perspectives
Person in charge (Specialty)	Michiko Ozawa (Fundamentals of Nursing) et al
Brief description of activity	Significance and influence of pleasure experience on human development and mental health are studied.
Evaluation of activity/ Work implemented	The elements of "pleasure experience" from childhood up to old age were obtained.
Publications and other outcomes	Michiko Ozawa, et al.: Significance and influence of "pleasure experience" in childhood on his/her life thereafter - analysis on elderly people. The 55th Conference of Japan Child-Care Society (May 2002, Tokyo) Michiko Ozawa, et al.: Pleasure experience and its elements in life from various perspectives. The 18th Conference of Japan Academy of Mental Health (November, 2002, Tokyo) Michiko Ozawa, et al.: Pleasure experience in life - analysis on elderly people. The 14th Conference of Japan Society of Developmental Psychology (March, 2003, Kobe)
Plans	Constitutional elements of pleasure experience will be clarified and pleasure experience will be studied in people suffering from disease and/or disability
KRA	3
Resources	The Ministry of Education, Culture, Sports, Science and Technology (Grant-in-Aid for Scientific Research "KAKENHI")

Name of activity	Support for twins born after infertility treatment of the parents
Person in charge (Specialty)	Masako Momoi (Maternal & Midwifery Nursing)
Evaluation of activity/ Work implemented	A qualitative study on needs of woman who have multiple pregnancies after infertility treatment was conducted in order to strengthen programs of maternity care for such women.
KRA	4

Resources	The Ministry of Education, Culture, Sports, Science and Technology (Grant-in-Aid for Scientific Research “ KAKENHI”)
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Name of activity	Evaluation of a psycho education group program in a hospital learning center for patients with hematological malignancies
Person in charge (Specialty)	Keiko Shimoeda (Psychiatric & Mental Health Nursing)
Brief description of activity	A psycho-education program in a hospital learning center for patients with hematological malignancies were developed and evaluated.
Evaluation of activity/ Work implemented	The draft program reported from our previous study was further discussed. After reviewing pertinent literature, a new program is being prepared.
Plans	The program will be introduced and its usefulness evaluated.
KRA	4
Resources	The Ministry of Education, Culture, Sports, Science and Technology (Grant-in-Aid for Scientific Research “ KAKENHI”)

Name of activity	Support for the family with a cancer patient at the end stage, focusing on nursing care to raise the family’s hope.
Person in charge (Specialty)	Noriko Iba (Adult Nursing)
Evaluation of activity/ Work implemented	A report of the study was submitted in March, 2002. The project has been completed.
KRA	3, 4
Resources	The Ministry of Education, Culture, Sports, Science and Technology (Grant-in-Aid for Scientific Research “ KAKENHI”) (until March, 2002)

Name of activity	Developing guidelines for risk management for practicing nurse midwives
Person in charge (Specialty)	Hiromi Eto, Naoko Arimori and Shigeko Horiuchi (Maternal & Midwifery Nursing)
Evaluation of activity/ Work implemented	A survey of risk management among practicing midwives was conducted.
Publications and other outcomes	Japan Academy of Midwifery (See Abstract 9 )
KRA	3, 4 ,5
Resources	Japan Academy of Midwifery

Name of activity	Development of guidelines for terminal care at home
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Person in charge (Specialty)	Hiromi Kawagoe (Community Health Nursing)
Evaluation of activity/ Work implemented	From the results of a survey of nurses at home-visiting nurse stations, 9 types of care programs were found to be useful in home-care for patients with end-stage cancer. Based on the data, guidelines for terminal care at home were prepared. Now the guidelines are being used in practice. Next, we study will focus on standardizing home-care for patients in the terminal stage. The study will be reported by March 2005.
Publications and other outcomes	The 21st Conference of Japan Academy of Nursing Science The 5th Asia Pacific Hospice Conference (See Abstract 10,11,12 )
KRA	3, 4
Resources	The Ministry of Education, Culture, Sports, Science and Technology (Grant-in-Aid for Scientific Research “ KAKENHI”)

Name of activity	Development and evaluation of a cognitive group therapy program for women with depression in community
Person in charge (Specialty)	Yoshie Okada (Psychiatric & Mental Health Nursing)
Evaluation of activity/ Work implemented	Studies on effectiveness of cognitive group therapy program, which have been reported in the past five years were reviewed. A practical approach was developed for used women with mild depression.
Publications and other outcomes	Journal of Japan Academy of Psychiatric and Mental Health Nursing, 11(1), 2002 (See Abstract 13)
KRA	4
Resources	The Ministry of Education, Culture, Sports, Science and Technology (Grant-in-Aid for Scientific Research “ KAKENHI”)

Name of activity	Evaluation of the effect of sitting position without back support upon consciousness of vegetative patients
Person in charge (Specialty)	Nobuko Okubo (Fundamentals of Nursing)
Evaluation of activity/ Work implemented	Studies have been conducted with one patient with consciousness disorder who receives care at home and with patients in two hospitals. The treatments result in some change in the level of consciousness in all subjects.
KRA	4
Resources	The Ministry of Education, Culture, Sports, Science and Technology (Grant-in-Aid for Scientific Research “ KAKENHI”)

Name of activity	Preschool children's responses to procedures and interventions of nurses.
Person in charge (Specialty)	Satori Suzuki (Pediatric Nursing)
Evaluation of activity/ Work implemented	Data collection for a comparative study is being conducted. Interactions between children and nurses have been observed, and nurses have been interviewed.
KRA	4
Resources	The Ministry of Education, Culture, Sports, Science and Technology (Grant-in-Aid for Scientific Research "KAKENHI")

Name of activity	Development and evaluation of resources to support decision making by pregnant women about genetic care
Person in charge (Specialty)	Naoko Arimori (Maternal & Midwifery Nursing)
Evaluation of activity/ Work implemented	Preparation of leaflet which will help pregnant women make a decision when they want for advice about prenatal genetic issues.
KRA	4
Resources	The Ministry of Education, Culture, Sports, Science and Technology (Grant-in-Aid for Scientific Research "KAKENHI")

Name of activity	Association of activities of daily living and indices of mental status with subsequent 20-year all-cause mortality in an elderly Japanese population
Person in charge (Specialty)	Wakako Kushiro, et al. (Gerontological Nursing)
Brief description of activity	The team members conducted a prospective cohort study with a 20-year follow-up to examine the association of activities of daily living (ADL) and other risk factors with the risk of subsequent all-cause mortality in an elderly Japanese population.
Evaluation of activity/ Work implemented	There were strong associations among the levels of disability in ADL and several indices of mental status with subsequent mortality. It was concluded that good mental status may improve longevity even when elderly people have some disability in ADL.
Publications and other outcomes	The 2 <sup>nd</sup> RANHS Symposium "Elderly Health Care", Seoul Korea (See Abstract 14)
Project period	1996-2001
Plans	This cohort study has been completed.
KRA	3
Resources	St. Luke's Life Science and others

Name of activity	Long-term effects of psycho-education for schizophrenia patients to promote their active recovery from psychosis
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Person in charge (Specialty)	Eriko Mizuno (Psychiatric & Mental Health Nursing)
Wok implemented	Patients were interviewed about recognition of disease and medication before/after participating in a psycho-education program as well as after discharge. Currently, based on the analysis on the results, a psycho-education group after discharge is being developed.
KRA	4
Resources	The Ministry of Education, Culture, Sports, Science and Technology (Grant-in-Aid for Scientific Research “ KAKENHI”)

Name of activity	Establishment of care system to prevent dehydration in elderly patients - study on dehydration assessment -
Person in charge (Specialty)	Fumiko Kajii (Gerontological Nursing)
Brief description of activity	To develop care system to detect and prevent dehydration in elderly people in the early stage (assessment, care and monitoring methods)
Evaluation of activity/ Work implemented	As the first step in developing a care system, indices for assessment were studied to early detect dehydration in elderly patients.
Publications and other outcomes	Ochanomizu Medical Journal Japan Academy of Health and Nutrition System (See Abstract 15 )
Project period	Not specified
Plans	Assessment indices will be further studied in healthy and elderly people with independent life.
KRA	3
Resources	None. Application has been submitted.

Name of activity	Development telenursing system for chronic respiratory failure patients
Person in charge (Specialty)	Tomoko Kamei (Gerontological Nursing)
Publications and other outcomes	Japan Academy of Community Science Japan Academy of Nursing Science Bulletin of St. Luke’s College of Nursing, 29,2003 (See Abstract 16 )
KRA	3
Resources	The Ministry of Education, Culture, Sports, Science and Technology (Grant-in-Aid for Scientific Research “ KAKENHI”) Mitsubishi Foundation

## ② On-job training courses

Name of activity	Providing training courses for medical check-up personnel to perform the Japanese Denver Developmental Screening Test (JDDST)
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Person in charge (Specialty)	Michiko Ozawa (Fundamentals of Nursing)
Evaluation of activity/ Work implemented	Training courses were provided for medical check-up personnel to perform JDDST.
KRA	4

Name of activity	Gerontological Nursing Seminar, Japan 2002
Person in charge (Specialty)	Tomoko Kamei (Gerontological Nursing)
Brief description of activity	A gerontological nursing seminar was held in Tokyo for members of the Korean Gerontological Society.
Evaluation of activity/ Work implemented	Fifteen nurses from Korea visited St. Luke's College of nursing, a nursing home and a geriatric hospital to broaden their knowledge about graduate and post-graduate curriculum at the college as well as manpower policies under the Japanese long-term care insurance system.
Project period	Not specified
KRA	6

### ③ Developing the knowledge base for nursing practice

Name of activity	Study of the physiological effects of nursing interventions
Person in charge (Specialty)	Michiko Hishinuma (Dean, Fundamentals of Nursing)
Evaluation of activity/ Work implemented	Based on current status of nursing interventions, the effective techniques were studied.
Publications and other outcomes	Journal of Japan Academy of Nursing Technology
KRA	4
Resources	The Ministry of Health, Labour and Welfare The Ministry of Education, Culture, Sports, Science and Technology (Grant-in-Aid for Scientific Research “KAKENHI”)

Name of activity	Offering opinions and suggestions to the government about handling medical issues
Person in charge (Specialty)	Michiko Hishinuma (Dean; Fundamentals of Nursing)
Brief description of activity	Participating as the only nurse specialist on a committee to discuss medical issues (under the authority of the Tokyo Metropolitan Government).
Evaluation of activity/ Work implemented	Participation in the final meeting to discuss revision of basic medical strategies in the future (under the authority of the Tokyo Metropolitan Government).
Project period	Two years
KRA	4, 5

Name of activity	Reorganization of Education & Research System at St. Luke's College of Nursing
Person in charge (Specialty)	Michiko Hishinuma (Dean; Fundamentals of Nursing)
Brief description of activity	Expansion of the organizational structure of the College to strengthen post-graduate education and the activities of WHO Centre: The St. Luke's Research Centre for Nursing Practice Development will be established in April 2003. This Research Centre consists of four sections (nursing practice development, research on nursing education, international nursing and research on nursing strategies). In collaboration with the international nursing section, the WHO Centre will initiate a post-graduate course focusing on international nursing education and research in the near future.
Evaluation of activity/ Work implemented	A new center to support nursing research has been developed by the college; one of its goals is to support international collaboration.
KRA	3, 4

#### ④ For non-professionals

Name of activity	Sex education for elementary school children
Person in charge (Specialty)	Maternal & Midwifery Nursing
Evaluation of activity/ Work implemented	The staff members have been working on a project "Education on life for children." The results of the project have been reported with evaluation.
KRA	4
Resources	The Ministry of Education, Culture, Sports, Science and Technology (Grant-in-Aid for Scientific Research "KAKENHI")

Name of activity	Education for citizens
Person in charge (Specialty)	Michiko Hishinuma (Dean, Fundamentals of Nursing)
Brief description of activity	Giving lectures on "nursing" at Waseda University and Rikkyo University. As one of the activities to broaden knowledge about PHC, a nursing course has been started for students who do not major in nursing, which we hope positive attitudes toward health. St. Luke's College of Nursing faculty worked with teaching staff at other universities.
Evaluation of activity/ Work implemented	"Nursing" course at Waseda University (6 years) has been completed in this year.
Plans	A report of experience in nursing education at Waseda University will be prepared.
KRA	3, 4

**(4) To facilitate research development relevant to nursing by identifying research priorities and developing research networks**

Name of activity	Organize and present the annual Conference of St. Luke's College of Nursing Society for Research (started in 1996 )
Evaluation of activity/ Work implemented	The 7th Conference of St. Luke's College of Nursing Society for Research focused on nursing and literature. In the symposium, it was concluded that "speaking" would be useful for enriching nursing care and for understanding each other (348 participants; 22 research projects). Journal of St. Luke's College of Nursing Society for Research has been published.
Publications and other outcomes	The 7th Conference of St. Luke's College of Nursing Society for Research in Tokyo (September, 2002) Journal of St. Luke's College of Nursing Society for Research, 6(1) (June, 2002) Journal of St. Luke's College of Nursing Society for Research, 6(2) (September, 2002)
KRA	4

Name of activity	Organize and present an Open Seminar, a formal one day program about current topics
Evaluation of activity/ Work implemented	The open seminar was the second of tow focused on "Evidence-Based Nursing". Dr. Linda Johnston (Associate Professor at Melbourne University and Vice-Director at Victoria Nursing Practice Research Center) made two presentations, "Evidence-based nursing in clinical practice: life education" and "EBN - future study and orientation." Other presentations related to theme (about 400 participants).
Publications and other outcomes	The 34 <sup>th</sup> Seminar of St. Luke's College of Nursing
KRA	4

**(5) To influence governmental and professional agencies to promote nursing leadership in the development of primary health care (KRA 1)**

Members of St. Luke's College of Nursing WHO Centre play important roles in governmental and professional agencies, as shown in Table 1.

In addition, members of St. Luke's College of Nursing WHO Centre who are in leadership roles in academic and research organizations in Japan are identified in Table 2. Most such organization has three levels of participation, in ascending order of responsibility and authority: member, council member and board member.

Table 1. Leadership in governmental and professional organizations

Name	Name of Organization (Position)
Keiko Tokiwa	<ul style="list-style-type: none"> <li>• The Society of Private College of Nursing in Japan (Board)</li> <li>• Japan University Accreditation Association (Council)</li> </ul>
Michiko Hishinuma	<ul style="list-style-type: none"> <li>• Inspection for Nursing and Health (under the authority of the Ministry of Education, Culture, Sports, Science and Technology) (Inspection member)</li> <li>• Selection Committee of Scholarship for Nurses (under the authority of the Tokyo Metropolitan Government) (Member)</li> <li>• Project to Strengthen Nursing in El Salvador (Member)</li> <li>• Inspection for Recognition of Educational Materials (under the authority of the Ministry of Education, Culture, Sports, Science and Technology) (Inspection member on a temporary basis)</li> <li>• Committee on Medical Technology Authorized by the Ministry of Health, Labour and Welfare (group for community health nurses, midwives and nurses) (Member)</li> <li>• Steering Committee for Grants-in-aid for Medical Research for International Cooperation (under the authority of the Ministry of Health, Labour and Welfare) (Member)</li> <li>• Committee on Medical Issues (under the authority of the Tokyo Metropolitan Government) (Member)</li> <li>• Committee for University Evaluation and National Institution for Academic Degree (Member)</li> <li>• Japan University Accreditation Association (Committee member for nursing research)</li> <li>• Japanese Association for Nursing Programs in Universities, Executive Committee (Member)</li> </ul>
Naoko Arimori	<ul style="list-style-type: none"> <li>• Japan Society of Midwifery Education (Adviser)</li> </ul>
Hiroimi Eto	<ul style="list-style-type: none"> <li>• Japan Society of Midwifery Education, Education Committee (Member)</li> <li>• Japan Society of Midwifery, Tokyo, Education Committee (Member)</li> </ul>
Shigeko Horiuchi	<ul style="list-style-type: none"> <li>• Japan Society of Midwifery Education (Board)</li> </ul>
Noriko Iba	<ul style="list-style-type: none"> <li>• Project to Study Curriculum for Certified Expert Nurse (hospice care) of the Japanese Nursing Association (Member)</li> </ul>
Ikuko Iwai	<ul style="list-style-type: none"> <li>• Working Group to Study the Assessment of the Level of Home Care (under the authority of the Ministry of Health, Labour and Welfare) (Member)</li> </ul>

	<ul style="list-style-type: none"> <li>• Research Committee on Nursing Activities (Professional member)</li> <li>• Japanese Nursing Federation (Officer)</li> </ul>
Tomoko Kamei	<ul style="list-style-type: none"> <li>• Project to Certify Clinical Nurse Specialists of the Japanese Nursing Association (Member)</li> </ul>
Hiromi Kawagoe	<ul style="list-style-type: none"> <li>• Promotion Project for Home-Care Insurance in Chuo-ku, Tokyo (Vice-Chairperson)</li> <li>• Assessment of the Level of Home-Care in Chuo-ku (Head)</li> <li>• Project to Support Intractable Disease Patients sponsored by Tokyo Metropolitan Government (Member)</li> <li>• Project to Study Home-Visit Nursing of the Japanese Nursing Association (Head)</li> <li>• Japanese Association of Home-Visit Nursing (Board)</li> <li>• The Liaison Office Between Nursing Stations in Tokyo (Adviser)</li> <li>• Project to Study Terminal Care (under the authority of the Ministry of Health, Labour and Welfare) (Member)</li> <li>• Committee for Examination to Certify Care-Providing Specialist (under the authority of the Ministry of Health, Labour and Welfare) (Core member)</li> <li>• Committee of Medical Technology (group for community health nurses, midwives and nurses) (Member)</li> </ul>
Ikuko Oikawa	<ul style="list-style-type: none"> <li>• Research Projects for Children Suffering from Specific Chronic Diseases of the Ministry of Health, Labour and Welfare (Member)</li> <li>• Research Projects for Children with Chronic Disease of Japanese Nursing Association (Member)</li> </ul>
Michiko Ozawa	<ul style="list-style-type: none"> <li>• The Japan Overseas Christian Medical Cooperative Service, Nursing Committee (Member); Evaluation Committee (Member)</li> <li>• Tokyo Safran Home (institution for blind women) (Council)</li> <li>• St. Luke's Nursing School (Council)</li> </ul>
Junko Tashiro	<ul style="list-style-type: none"> <li>• Japanese Nursing Association, Committee for Social Welfare and Economics (Member)</li> <li>• Japanese Nursing Association, Committee for Study of International Activities (Member)</li> </ul>

Table 2. Leadership in academic and research organizations

Name	Name of Organization (Position)
Keiko Tokiwa	<ul style="list-style-type: none"> <li>• St. Luke's Society for Nursing Research (President) (until September 2002)</li> </ul>
Michiko Hishinuma	<ul style="list-style-type: none"> <li>• St. Luke's Society for Nursing Research (Chair of Board)</li> <li>• Japan Academy of Nursing Science (Chairperson of the Research Conference, 2002)</li> <li>• Japanese Society of Nursing Art and Science (Board)</li> </ul>
Hiromi Eto	<ul style="list-style-type: none"> <li>• Japan Academy of Nursing Science, International Activities Committee (Member)</li> <li>• Japan Academy of Midwifery (Secretary for General Affairs)</li> </ul>

Yumiko Hayama	<ul style="list-style-type: none"> <li>• Japan Academy of Psychiatric and Mental Health Nursing (Board)</li> <li>• Health Behavioral Science (Council)</li> <li>• Japanese Association of Mental Health Policy (Permanent Board member)</li> <li>• St. Luke's Society for Nursing Research (Council)</li> </ul>
Yuko Hirabayashi	<ul style="list-style-type: none"> <li>• Japanese Society of Child Health Nursing (Council)</li> </ul>
Shigeko Horiuchi	<ul style="list-style-type: none"> <li>• Japan Academy of Midwifery (Chairperson)</li> <li>• St.Luke's Society for Nursing Research (Council)</li> <li>• Japan Academy of Breast-Feeding (Board)</li> <li>• Japan Society of Maternal Health (Council)</li> </ul>
Noriko Iba	<ul style="list-style-type: none"> <li>• Japanese Society of Cancer Nursing (Council)</li> </ul>
Ikuko Iwai	<ul style="list-style-type: none"> <li>• Japan Society of Nursing Diagnosis (Board)</li> <li>• Japanese Society for Clinical Pathway (Board)</li> <li>• Japan Society for POS Health Care (Board)</li> <li>• Japan Academy of Nursing Science (Council)</li> <li>• St.Luke's Society for Nursing Research (Board)</li> <li>• Japan Society for Respiratory Care (Council)</li> <li>• Japanese Society Environmental Infection (Council)</li> </ul>
Chie Kaharu	<ul style="list-style-type: none"> <li>• Japanese Society of Nursing Art and Science (Board)</li> <li>• Japan Academy of Nursing Education (Council)</li> </ul>
Tomoko Kamei	<ul style="list-style-type: none"> <li>• Japan Academy of Home Health Care (Council; Editor)</li> <li>• The Japanese Society for Low-vision Research and Rehabilitation (Council)</li> <li>• Japan Society of Care Management (Council; Editor)</li> <li>• St. Luke's Society for Nursing Research (Board)</li> </ul>
Hiromi Kawagoe	<ul style="list-style-type: none"> <li>• Japan Academy of Community Health Nursing (Council)</li> <li>• The Japanese Cancer Association (Council)</li> <li>• Japan Academy of Nursing Administration and Policies (Council)</li> </ul>
Hiroko Komatsu	<ul style="list-style-type: none"> <li>• St.Luke's Society for Nursing Research (Board)</li> </ul>
Akiko Mori	<ul style="list-style-type: none"> <li>• St.Luke's Society for Nursing Research (Council)</li> </ul>
Hiroko Nagae	<ul style="list-style-type: none"> <li>• The Japanese Society of Health and Medical Sociology, Nursing Research Section (Vice-President)</li> <li>• Japanese Association of Hospice Care at Home (Board)</li> </ul>
Ikuko Oikawa	<ul style="list-style-type: none"> <li>• Japanese Society of Child Health Nursing (Board)</li> <li>• The Japanese Society for Care and Education in Pediatrics (Board)</li> </ul>
Michiko Ozawa	<ul style="list-style-type: none"> <li>• St.Luke's Society for Nursing Research (Board)</li> <li>• The Japanese Society of Health and Human Ecology (Council)</li> </ul>
Junko Tashiro	<ul style="list-style-type: none"> <li>• Japan Academy of Nursing Science (Board)</li> <li>• Japan Society of Adolescentology (Council)</li> </ul>
Yumi Yokoyama	<ul style="list-style-type: none"> <li>• Japan Academy of Neonatal Nursing (Council)</li> </ul>

**(6) To support international collaboration in nursing education, research and practice related to primary health care**

Name of activity	Provide and disseminate information about activities of the WHO Collaborating Centre
Person in charge (Specialty)	WHO Collaborating Centre
Evaluation of activity/ Work implemented	The center submitted bi-monthly "WHO News" to the journal Kango (Nursing)
Publications and other outcomes	Bi-monthly reports in Kango, published by the Japanese Nursing Association
KRA	4

Name of activity	International relationship in nursing education and research
Brief description of activity	Professor William Holzemer of the University of California at San Francisco School of Nursing (UCSF) provided a series of lectures on research methodology for masters and doctoral students (separately) as well as research consultations for them and faculty members during his three week stay at the college.
KRA	4

Name of activity	Participation in the 11th General Meeting of the Global Network
Person in charge (Specialty)	WHO Collaborating Centre
Brief description of activity	Professors Tashiro and Hayama attended the General Meeting of the Global Network at Chicago between February 27 and March 1, 2002. Major activities of the Centre were reported there. In the academic meeting, the results of our study "Development of a Community Nursing Practice Model Using Primary Health Care Concepts in Japan" were presented. Our Centre assumed responsibility as the WHO Collaborating Centre regional office for the Western Pacific Region from Yonsei University, Korea.
KRA	1

In addition to participating in activities sponsored by WHO, and attending international academic conferences, or participating in study tours, members of the Centre are hosts to international visitors and students, as shown in Table 3.

Table 3. Acceptance of visitors and students

Date	Name	Position	Funding	Specialty Group
7/1/2002	Ms. Muneera AL-OSAIMI  Ms. Sania Mohammed Saleh ABDUL-KHALEG  Ms. Sabah I. M. AL-SOMALI  Ms. Rowaidah A. Y. Shoeib AL-HAWSSA  Ms. Hanah Ibrahim AL-EISSA	King Fafaddo Hospital in Jeddah, Head of Nursing Training Center  Women's Health Science Junior College in Jeddah, Director of Nursing Section  Al-Yamama Hospital, Director of Nursing Department  Director of Training Section of Community Health Nursing and Continued Education in Medina Municipal Office  Galvia Health Center, Nursing Specialist (Saudi Arabia)	Japan International Cooperation Agency (JICA)	Nursing Education
7/6/2002-8/3/2002	Amy M. Gardner	Villanova University, College of Nursing, third year of Bachelor ( USA )	American Council of St. Luke's International Medical Center	Dean
7/8/2002	Ms. SANN Vanna  Ms. Olivia JOHNSON KELLY  Ms. ONYANGO Elizabeth Akinyi  Ms. OYWER Elizabeth Omollo  Ms. Maria del Carmen VELANDRES  Ms. UDALAMATTA GAMAGE Padmaseel Nanda  Ms. WANNI ARACHIGE DONA Anne Briyatis Melka	National Maternal Health Center, Vice-director of Obstetric Hospital (Cambodia)  Francisco E. Mocosopuerio Hospital, ICU nurse (Dominica)  Kism Community Hospital, OR Nurse Nursing Officer III (Kenya)  Ministry of Health, Senior Nursing Officer (Kenya)  National Cancer Center, Head of Pediatric Section (Peru)  Castle Street Hospital, Head of Obstetric and Neonatal Section (Sri Lanka)  Abisawella Hospital, Head of Obstetric Section (Sri Lanka)	Japan International Cooperation Agency (JICA)	Research Methodology & Theoretical Nursing
9/30/2002-8/2/2003	Kaori Sakurai Lilian	(Brazil)	Japan International Cooperation Agency(JICA)	Pediatric Nursing

\*KRA ( Key Result Area) ;

KRA 1 - Health Planning, Advocacy and Political Commitment

KRA 2 - Management of Health Personnel for Nursing and Midwifery Service

KRA 3 - Practice and Health System Improvement

KRA 4 - Education of Health Personnel for Nursing and Midwifery Services

KRA 5 - Stewardship and Governance

## **Part II**

### **Research abstracts**

## 1. Care Services from Home-Visiting Nurse Stations Available for Children Who Receive Treatment at Home

Yumi Yokoyama<sup>1)</sup>, Ikuko Oikawa<sup>1)</sup>, Yuko Hirabayashi<sup>1)</sup>, Tamami Shimada<sup>2)</sup>, Shizue Sayuki<sup>3)</sup> and Chizuru Kawagoe<sup>4)</sup>

- 1) St. Luke's College of Nursing
- 2) Kawasaki-Daishi Home-Visiting Nurse Station
- 3) Kitazawa Home-Visiting Nurse Station
- 4) Municipal Medical University

### Purpose

As one of the care support programs of home-visiting nurse stations in the community, nurse experts provide care and support for children with chronic disease and/or disability receiving care at home. The purpose of this study was to describe what services can actually be provided by the stations, what services are needed, reasons for not being able to provide care, as well as to identify related problems.

### Methods

In March 2002 questionnaires were distributed to 94 home-visiting nurse stations that have experienced or will start home-visit pediatric care. One nurse was to respond for each home-visiting nurse station; 58 nurses completed the questionnaires (61.7%).

### Results

Most nurses thought that they could provide nursing services for children. One of the major needs is providing nursing care for children while parent(s) are away from home. A previous survey of families also showed that most of families want such care support services and have used them. Another need that could be better satisfied is "rehabilitation." Most families were unlikely to take advantage of rehabilitation, while in fact they want to receive rehabilitation service. This suggests that the possibility of home-visiting nurse being able to provide rehabilitation care should be further discussed and that coordination with specialists might be improved. Another issue to be discussed is adjusting "time and charge for service."

### Conclusions

Most needs of children and families could be met through services from the home-visiting nurse stations. However, discussions are required if this is to be accomplished in a way that fully meets the needs of families.

## 2. Care Model for Children with Asthma Receiving Out Patient Hospital Care

Yuko Hirabayashi<sup>1)</sup>, Ikuko Oikawa<sup>1)</sup>, Yumi Yokoyama<sup>1)</sup>, Eri Suzuki<sup>1)</sup>,  
Chizuru Kawaguchi<sup>2)</sup>, Chie Suzuki<sup>3)</sup>, Mie Ohara<sup>4)</sup> and Yumi Ishii<sup>5)</sup>

- 1) St. Luke's College of Nursing
- 2) Municipal Medical College
- 3) Fukushima Prefectural Medical College
- 4) Chiba Children's Hospital
- 5) Chiba University Hospital

### Purpose

This study focuses on the development of a care program to support children with asthma receiving outpatient hospital care and their families.

### Methods

The program was drafted through discussion in five study meetings attended by 23 pediatric nurses responsible for clinic care and the above eight researchers. Discussions covered problems that are likely to occur among children with asthma and their families and detailed nursing approaches. Advice and suggestions from doctors in the specialty, therapists for respiratory rehabilitation and inpatient clinical nurses were incorporated into the model.

### Results

The care model consists of four areas. These are: 1) supporting daily life to prevent asthma attack; 2) providing mental and social support; 3) supporting the family when the child has an asthma attack; and 4) supporting the child when he/she visits hospital because of an asthma attack. For each area details of nursing care are presented. These include checkpoints for outpatient visits, care points and instructions to help clinical nurses understand the child's condition, and how to support his/her family as quickly as possible.

### Conclusions

The care program incorporates improvements to current nursing approaches. These are designed to enable nurses to recognize difficult situations that are likely to occur, such as maintaining effective continuing care, transfer to school life without difficulty, nurse's attitudes toward asthmatic child's brother/sister and judging the severity of an asthma attack. The usefulness and effectiveness of the care model will be evaluated in the future.

### 3. Development of the Day Care Model for Cancer Patient Receiving Adjuvant Chemotherapy in the Outpatient Setting

Hiroko Komatsu, RN, PhD<sup>1)</sup>, Noriko Iba RN,MN<sup>1)</sup>, Akiko Tonosaki, RN,PhD<sup>1)</sup>  
Naoko Hayashi, RN, PhD<sup>1)</sup>, Yukiko Nakayama, RN,MN<sup>1)</sup>,  
Yukiko Iioka, RN,MN<sup>1)</sup>, Yoko Tamahashi,RN<sup>2)</sup>,Hisako Kanai, RN<sup>2)</sup>,  
Setsuko Yoshida, RN<sup>2)</sup>, Noriko Kawana,RN,MN<sup>2)</sup>, Megumi Nakamura,RN,MN<sup>2)</sup>,  
Masako Kuroda,RN<sup>2)</sup>, Chitose Watanabe, RN,MN<sup>2)</sup>,Mikako Okada, RN,MN<sup>2)</sup>,  
Kikumi Inoue, RN<sup>2)</sup>, Shiho Wagatsuma, RN<sup>2)</sup>

- 1) St. Luke's College of Nursing
- 2) St. Luke's International Hospital

#### Purpose

The purpose of this study was to develop a Day Care Program for promoting adjustment in cancer patients receiving chemotherapy at their oncology outpatient clinic.

For this purpose, there were two concrete objectives. (a)basic research into clarifying the demands, coping skills and adaptation through receiving adjuvant chemotherapy; (b)to develop a Day Care Program for promoting adjustment in cancer patients receiving adjuvant chemotherapy on basic research and review of the literature.

#### Methods

Subjects: The subjects were 275 cancer patients receiving adjuvant chemotherapy at their oncology outpatient clinic. Study criteria included: aged over 20, diagnosed with cancer, agreed to participate in the study. Data collection: The cross-sectional, correctional research design was selected, data were consisted of the Stress and Coping Questionnaire and the Adaptation Questionnaire for cancer patient. Then, based on that results and related literature reviews, the program was developed.

#### Results

The variance of adaptation status was explained by threatening experiences and coping. Cancer patients receiving adjuvant chemotherapy have adapted to the stresses by using a variety of coping skills in their lives. Based on these results, the Day Care Program was developed. It aimed to ensure that (1)The cancer patients can promote effective coping with their treatments and daily hassles, (2)The cancer patients can enhance relationships and communication with family and friends through individual sources of support. The contents of this program consisted of (a)the resource kit to enhances self-learning for effective coping skills, and (b)support group to enhance relationships and partnerships with others.

#### Conclusion

The Day Care Program has the potential to assist cancer patients receiving chemotherapy to adapt physically, psycho-socially and interpersonally by mobilizing relevant coping skills, and facilitating the sources of support.

#### **4. Evaluation of a Pilot Program in Genetic Nursing for General Nurses in Japan**

Michiko Mizoguchi<sup>1)</sup> PhD, RN, Naoko Arimori<sup>2)</sup> MSN, RNMW, Satoko Nakagomi<sup>3)</sup> MSN, RNMW, Minako Morita<sup>4)</sup> PhD, RN, Hiroko Ando<sup>5)</sup> MSN, RNMW, Akiko Mori<sup>2)</sup> MSN, RNMW, Shigeko Horiuchi<sup>2)</sup> DSN, RNMW

- 1) Tokai University
- 2) St. Luke's College of Nursing
- 3) Hiroshima University
- 4) The Japanese Red Cross College of Nursing
- 5) Iwate Prefectural University

##### **Purpose and Method**

The focus of this study was the evaluation of a pilot presentation of a genetics education program for general nurses. Based on the results of the analysis of the responses to 89 items identified as part of nursing practice the program was designed to provide necessary basic knowledge to meet the proposed competencies of general nurses. It incorporated the 36 items identified as the role of nursing in genetics for the general nurse and the 10 items identified as the role of both general nurses and expert genetics nurses. As teachers for the program we invited two geneticists, one molecular biologist and two genetic nursing specialists nominated by ISONG, and four patients with hereditary disease or congenital abnormality were also invited to help participants understand what difficulties they have in their daily lives. We recruited 33 nursing faculty and clinical nurses to evaluate the pilot program and identify an appropriate evaluation method.

##### **Results**

All but one of the 33 participants (97%) was satisfied with the program. More than half (61%) rated the level of difficulty of the basic knowledge in the program as slightly hard (61%); the remainder rated the program as not hard (24%) and slightly easy (15%). The most difficult subjects of basic knowledge were 'chromosomal test', 'DNA test', 'gene therapy', 'risk assessment' and 'exploit social resources.' Subjects evaluated as most understandable were 'cooperation with other facilities providing genetics-related services', 'Mendelian inheritance', 'drawing pedigree', 'consideration of ethical, legal and social issues (ELSI)' and 'necessity of self-learning'. Case studies and direct discussion with patients were identified as the most effective strategies for understanding the nursing process with patients and families with genetic conditions. Several methods were used for pre- and post-program evaluation, including preparation of a care plan for a simulated patient. We think that to truly evaluate the gain in competencies for genetic nursing from participation in the genetics education program, evaluation should include the actual nursing skills shown in care for real patients.

## 5. Issues of Coordination Between Hospitals and Community Nursing Services and Suggestions to Improve the Care System

Chio Shimada<sup>1)</sup>, Masayo Kashiwagi<sup>2)</sup>, Yumi Chiba<sup>3)</sup>, Hiroko Nagae<sup>4)</sup>,  
Masako Sakai<sup>4)</sup>, Toshie Miyazaki<sup>4)</sup>, Yoko Sumikawa<sup>5)</sup> and Hiromi Kawagoe<sup>4)</sup>

- 1) Community Care and Welfare Research Center, Social Welfare Organization (Kagayaki-kai)
- 2) International Education Research Laboratory, Teikyo University
- 3) Tokyo Medical and Dental University
- 4) St. Luke's College of Nursing

### Purpose

The aim of this study was to identify ways to improve the care support system for coordination between hospitals and home-visiting nurse stations by clarifying current practices and associated issues.

### Methods

Because formal organizational relationships might influence patterns of coordination, a purposive sample based on sponsorship of home-visiting nurse stations (VNSS) was used. Nurse managers at six VNSS and nurse managers or nurse specialists with responsibility for liaison with the community nursing system at nine hospitals were interviewed. The sample of organizations included three independent VNSS, six hospitals that did not sponsor a VNSS but some of whose discharged patients received care from independent VNSS, three hospital-affiliated VNSS, and the three parent hospitals of the hospital-affiliated VNSS.

### Results and Discussion

Every hospital had a coordinator for medical support when patients are discharged from hospital. There was systematic process for discharge in the hospitals without affiliated VNSS. In some of these hospitals, however, some coordinators emphasized welfare needs while in others the focus was more on nursing needs. Whether the patients were informed of and/or referred to the care support system in the community depended on the hospital. The hospitals with affiliated VNSS were middle-sized and nurses could directly contact the affiliated VNSS or another VNSS in the community. Again, whether the patients were informed of and/or referred to the community care support system depended on the hospital. Hospital staff may know what care patients will need after discharge, but such information about patients was not always successfully supplied to some VNSS. For some patients, the home-visiting nurse needed to visit hospital to meet patient and hospital nurse before discharge in order to plan care. Even in such cases, they had difficulty in visiting hospital beforehand because of delayed information. This situation suggested that the need for a home-visiting nurse visit before discharge should be discussed, or coordinating system between hospital and VNSS for timely communication (sending/receiving patient information) should be established.

Three suggestions for improving coordination were made. Nurses from both hospitals and VNSS stated that information on discharge and coordination should be the focus of research conferences or meetings in order to promote information exchange and sharing. Nurses from all the VNSS said that their practice of reporting back to the hospital about care provided after discharge

helped in creating better understanding between them and hospital staff. Because sometimes patients were returning to communities outside the service area of affiliated VNSS or where there were several VNSS to choose among and needed information, it is suggested that hospital staff should gather and provide information about the capability of all the VNSS that might be used by their patients.

#### Conclusions

Basic and important ways to promote coordination for patient care between hospital and community include that hospital staff should identify what care patients will need at home, provide patient information to the VNSS, and that VNSS should be able to enable home-visiting nurses to meet patients before discharge, and then that VNSS should follow up patients after discharge, reporting back to the hospitals.

## 6 . The Development and Evaluation of a Model “ Home Care Collaboration Notebook” for the Elderly and Families Living at Home

Tomoko Kamei, RN., PHN., PhD<sup>1)</sup>, Teruko Omi,SW<sup>2)</sup>, Hiromi Kamiyama,MSW<sup>3)</sup>, Yukiko Kurokawa, PhD<sup>4)</sup>, Yoko Takazawa,RN<sup>5)</sup>, Yoshiki Tanaka, MD<sup>6)</sup>, Kanao Tsuji, MD<sup>7)</sup>, Yasuko Hashimoto,SW<sup>8)</sup>, Yoko Yamamoto,PHN<sup>9)</sup> , Mariko A. Foulk, MSW., ACSW<sup>10)</sup>, Ruth Campbell, MSW<sup>10)</sup>

- 1) St. Luke’s College of Nursing
- 2) Imizu Municipal Office Insurance for Care and Assistance for the Elderly Section
- 3) Japan College of Social work
- 4) Keiseikai Institute of Gerontology, University of Taisho
- 5) Yodogawa Christian Hospital, Visiting Nurse Station
- 6) Tanaka-Clinic
- 7) Life Care System
- 8) University of Taisho
- 9) Long-term Care Insurance Office, Senior Citizen’s Welfare Division, Social Affairs Bureau, Hiroshima City
- 10) Social Work. Dept, Turner Geriatriv Clinic, University of Michigan Health System

We have developed a model "home care collaboration notebook" for the elderly living at home. We have attempted to enhance the interdisciplinary team approach, and to improve the quality of life of the elderly and their families using this notebook communication.

The methods we used to develop the home care collaboration notebook were the following: 1) clarification of the goals of the use of this notebook, 2) identifying the existing problems of the similar notebooks used at present, 3) Creation of the trial notebook and the pilot of its application by using them with a limited number of the elderly and their families at home. After two trial periods and focus groups where we interviewed the care managers who used the notebook with their clients in two different prefectures, we reevaluated the product to make the final version.

The elderly and their families who used the notebooks were given the questionnaires twice to evaluate the effect of the notebooks. The first survey was given to six elderly persons who used it for a week. The second survey was given to seventy-one persons who used the notebooks for one month. The second surveys were given to the professionals who provided the care at home and at the day service centers also. The elderly persons of the sixty cases and the professional care providers of the sixty-six cases who include the care managers and seven of our authors were replied the surveys to independently evaluate the collaboration notebook.

The following outcomes were obtained from the above-mentioned surveys.

1. The positive outcome was obtained from more than half of the elderly surveyed. Many of them described the significance of using the notebook. They found the front page of the notebook which has a pocket to include the consumers' photo very useful.
2. The disciplines of the professional care providers included home helpers, visiting nurses, physicians, day service staff member, and students, and it was apparent that the interdisciplinary professionals were in charge of these cases.

This notebook became a medium of the communication with the care consumers and professional providers, and it was mostly used in the area of "information exchange" effectively. One care manager expressed that using the notebook helped to gather necessary information in order to monitor the services. Finally, the problem remained if the table of the bodily functions could be further improved.

In future studies we need to examine the effect of this notebook for long term care. We will also need to educate the local government care managers in regards to the effective usage of this product.

## **7. Important Elements of Consolidating Ability in Integrated Training Program (students who takes geriatric nursing course)**

Wakako Kushiro, Fumiko Kajii and Tomoko Kamei

St. Luke's College of Nursing

### Introduction

In 2000, the curriculum for geriatric nursing education at our college was revised in response to drastically changed care systems and institutions for elderly people. Our goal was to minimize the gap between nursing education and the lives of elderly people by providing students early exposure to elderly people and extending learning opportunities to a greater variety of situations relevant to them. We have been working on improving geriatric education step by step. With this study we wanted clarify the important elements of consolidation at the end of the program from the student's perspective. Students who experienced an elective geriatric nursing course and clinical practice in the final year were studied. The consolidating ability in integrated practice includes having interest and positive attitudes and identifying and generalizing issues based on knowledge and experience obtained so far.

### Methods

Five senior students participated in the study. Their integrative program consisted of 10 days providing care practice at a nursing home for elderly residents where each student worked with one resident; one day was spent with nursing staff/care-providers participating in care-plan conferences and assisting with rehabilitation of elderly people visiting on an ambulatory basis. Students' daily records of experience, self-evaluation, and case reports were analyzed. Data were categorized according to elements suggesting their consolidating ability.

### Results

In the daily records, self-evaluations and case reports of students we could see ways in which students experienced consolidation by their frequent mention of what they gained from the integrated program. Benefits included that they were able to: 1) accumulate knowledge obtained in the geriatric course, 2) experience geriatric nursing practice (positive attitude toward care for elderly people); 3) understand team approach and recognize specialty of nursing; 4) think in a creative and flexible way; and 5) consolidate (thinking of care focusing on QOL).

### Discussion

The integrated program provided students with a good opportunity to design a care plan as a team member. In geriatric hospitals where death discharge and transfer to another hospital commonly occur, students are unlikely to learn how to provide care for elderly patients as well as family. The curriculum was enhanced and practicing sites were expanded by introduction of nursing home for elderly people receiving care. Feedback from both nursing staff and other care-providers to students helped them consolidate knowledge and experience. The flexible and creative way that students provided care also improved QOL of elderly people. However, some students needed more time to for consolidation goals to be met. The reason for this should be clarified in order to further improve geriatric education.

## **8 . Exploring Health Promoting Lifestyle Behaviors of Japanese College Women : Perceptions, Practices, and Issues**

Junko Tashiro, R.N., Ph.D.

St. Luke's College of Nursing

The purpose of this study was to explore promoting lifestyle behaviors of college women in Japan. In addition, perceived health status and concerns were evaluated. The methods used were both qualitative and quantitative approaches. The qualitative data from focus groups with 38 Japanese college women were used to develop a questionnaire. Subsequently, randomly selected 546 college women responded to the mailed survey (response rate 54%). Forty percent of the college women respondents perceived themselves as "rather unhealthy" or "unhealthy". The investigator conclude that, 1) perceived health promoting lifestyle behaviors, health status, and health concerns were mutually associated, thus, to increase perceived health status and/or decrease perceived health concerns, promoting healthy lifestyle behaviors must be considered, 2) the number of perceived motives or cues and the number of perceived health concerns of importance to college women must be considered to promote healthy lifestyle behaviors.

## 9. Risk Management for Practicing Midwives : Risk Factors and Countermeasures to Prevent Risks

Hiromi Eto<sup>1)</sup>, Naoko Arimori<sup>1)</sup>, Shigeko Horiuchi<sup>1)</sup>, Yaeko Kataoka<sup>2)</sup>, Tomoko Imamura<sup>2)</sup> and Makiko Noguchi<sup>3)</sup>

1) St. Luke's College of Nursing

2) St. Luke's College of Nursing, Graduate School

3) Tokyo University, Graduate School

### Purpose

As physiological phenomena, most pregnancies and deliveries run a natural and uncomplicated course. However, there is always the possibility of an abnormal course. Midwives starting practice at independent birth centers in communities should carefully plan for risk management, one of the most important factors to protect the lives of mothers and their babies, and for coordination with hospitals in case of emergency. There have been no reports in Japan describing factors leading to a midwife's decision to transfer the mother to a hospital. This study was carried out to describe the events that resulted in, or presented, a recognized risk of medical accident. Our goal for the future is to prepare appropriate care guidelines for midwives to prevent risks.

### Methods

Six practicing midwives and two nurse specialists at hospitals with experience accepting pregnant women from practicing birth centers responded to a semi-structured interview. They were asked to talk freely about emergency cases transferred to hospitals and risky cases (cold-sweat experiences). Analysis was organized with reference to a 4M-4E matrix. Each case was analyzed in terms of four specific situational factors: man (software; manpower), machine (hardware; mechanics), media (environment), and management. Then, the data were studied to identify measures to improve risk management: education, engineering (training), enforcement (engineering; technology), and example (enhancement and standards).

### Results

The eight participants described eleven cases; however, one case was excluded from analysis because the situation was not clear. Six cases were from practicing midwives and five from nurses at the transfer hospitals. In terms of related factors, seven cases were associated with man, four with management, one with machine; no case was associated with media.

Man-associated factors related to: 1) individual factors associated with the midwife herself; 2) the relationship between the midwife and the pregnant woman and her family; and 3) the relationships among medical staff members (between midwife and collaborating physician, between midwives, and between midwife and the transfer hospital). Factors associated with the midwife included making an "inaccurate diagnosis" of prenatal heart rate and time of hospitalization and continuing to care for the puerperal woman even when she suspected a possible risk in the normal course of delivery such as post-term childbirth, use of parturifacient and vaginal birth after caesarian (VBAC). Need for change in the plan of care created difficulties in relationships between midwives and their patients. Relationships were strained when the midwife felt the necessity of urgent transfer to another hospital and the woman strongly

wanted childbearing at the birth center. The midwife listened to the woman's desires and wanted to comply with her hope. As a result, she was forced to provide care other outside the scope of usual midwifery practice. In terms of relationships with family, differences in opinion between a midwife and a puerperal woman about risky treatment led to misunderstanding between midwife and family afterwards. Risks also arise from relationships between midwives and medical staff. A midwife sought the services of a collaborating physician not able to treat emergency cases. A midwife was not able to give her opinion about the doctor's decision. Relationships among professionals were ambiguous, responsibility for diagnosis and care was not clear.

Management-associated factors were also multi-faceted: 1) absence of agreements about referring and transferring pregnant or laboring women to a hospital; 2) absence of procedures about informed consent (for example, for external version); 3) issues arising because some birth centers used parturifacients. Regarding mechanics, inadequate preparation of treatment items for emergency bleeding during home birth was a powerful example of a risk situation.

### Conclusions

The factors associated with mechanics and management create risk, but those associated with people (man) were more likely to cause frequent problems and contribute to risk. Our analysis suggests the need to improve relationships between midwives, collaborating physicians and midwives and doctors at the transfer hospital, between midwives and between midwife and pregnant woman and/or her family. For care at a birth center, there should be formal written 'agreements' and procedures to describe cooperative relationships among professionals and for obtaining informed consent from each pregnant woman and her family. Especially, if the woman strongly wants to bear a baby at birth center even in a risky situation, the midwife should be able to fully explain the situation and persuade the woman to receive necessary care and treatment. The analysis also revealed the poor ability of midwife herself in diagnosis. At birth centers without an operating room and related equipment, midwives should be able detect abnormal signs as early as possible, considering the time to transfer. For women having a normal course of pregnancy who previously have had post-term childbirth or caesarian section, or may need the use of a parturifacient, midwives should recognize that continuing care may require deviation from usual midwifery practice.

As countermeasures to reduce risk for mothers and infants, and to improve care, we propose a variety of approaches. There is urgent need for midwifery care guidelines that can reflect the differing characteristics of birth centers. Attention must be given to the developing agreements between birth centers and transfer hospitals about criteria for transfer of patients. A system of required continuing education to improve practicing ability should be developed. Because birth centers will have difficulty implementing these changes by themselves, occupational organizations should assume responsibility for supporting changes in the systems that support midwifery care. And, professional organizations have an important role in broadening information about childbearing at birth centers, even for the public.

## 1 0 . Determinants of the Place of Death among Home Hospice Patients with Cancer in Japan

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### Introduction

Although the place of death of patients with cancer is influenced by various factors, few studies have investigated determinants of the place of death for home hospice patients with cancer comprehensively. The purpose of this study is to examine the influence of patient's sociodemographic, clinical, and support network factors on the place of death for home hospice patients served by a home care agency in Japan.

### Methods

The home care agencies that provide home hospice care were selected and asked to be responded the questionnaire about the cancer patients who were cared and died at home or in a hospital within the last 6 months from the study period, July 2001.

### Results

Among the 528 patients from the 259 home care agencies, 342 (65%) died at home and 186 (35%) died in a hospital. From the multivariate logistic regression model, the patients who had desire for receiving home care at referral (Odds Ratio, 95% Confidence Interval: 2.19, 1.09-4.40) in addition to the family caregiver's desire (OR, 95%CI: 3.19, 1.75-5.81), who had more than one family caregivers (OR, 95%CI: 2.28, 1.05-4.94), who were never rehospitalized (OR, 95%CI: 0.04, 0.02-0.07), who received more than usual home visits by home hospice nurse in the stable phase (OR, 95%CI: 1.25, 1.02-1.53), who were at the greatest functionally dependent status in the dying phase (OR, 95%CI: 8.60, 4.97-14.89), and who had support from family physician (OR, 95%CI: 2.23, 1.21-4.08) were more likely to die at home.

### Conclusion

Understanding factors that influence the place of death of home hospice patients with cancer allows health care professionals to modify home care services to help patients die at the place they prefer.

# 1 1 . Correlation between the Health System Factors of Home Care Agencies and the Number and the Rate of Patient's Home Death in Japan

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## Introduction

The purpose of this study was to examine the correlation between health system factors and the number and the rate of Patient's home death among homecare agencies in Japan.

## Methods

The home care agencies that provide home hospice care were selected and asked to answer the questionnaire about the health system characteristics of the agency for terminally ill cancer patients. The study was conducted in July 2001.

## Results

The data of 259 home care agencies were analyzed. The home death rate in the agencies which had the 24-hour nursing supportive care system was significantly higher than that in the agencies which didn't have the system ( $t=-2.62$ ;  $d.f.=257$ ;  $p=0.009$ ). The home death rate in the agencies which had patients' crisis support system and patients' intensive care system was significantly higher its counterparts ( $t=2.59$ ;  $d.f.=257$ ;  $p=0.01$ ,  $t=2.11$ ;  $d.f.=257$ ;  $p=0.04$ ). The home death rate in the agencies which have inpatient beds was significantly lower than their counterparts ( $t=-3.03$ ;  $d.f.=257$ ;  $p=0.003$ ). The agencies that visited patients constantly during the night-time and holiday had more patients who died at home ( $t=2.04$ ;  $d.f.=257$ ;  $p=0.04$ ).

## Conclusion

Understanding health system factors that heightened the number/rate of the home hospice patients who dead at home allows healthcare professionals to develop effective home care support system in order to realize home death when the patients prefer.

## 1 2 . Correlation between the Health System Factors of Home Care Agencies and the Satisfaction of Patient, Family from Nurse Point of View, and That of Nurse in Japan

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### Introduction

The purpose of this study is to clarify the correlation between the health system factors the number/rate of the satisfaction of patient, family, and nurse among home care agencies in Japan

### Methods

The home care agencies that provided home hospice care were selected and asked to answer the questionnaire about the health system characteristics of the agency for terminally ill cancer patients. The satisfaction was measured by the VAS scale. The study was conducted in July 2001.

### Result

The data of 259 home care agencies were analyzed. these six factors of home care agency had significant relation to the satisfaction of patient, family and nurse ( $p>.05$ ). They were fatalities of terminally ill cancer patient/year; number of patient's home death/year; number of terminally ill cancer patients a nurse has taken charge of; team care with the pharmacists; desire for home care of patient and his family; dying at home.

### Conclusion

It is clarified that, when patient and his family have a strong desire for home death, the characteristics of agency which enable patients' home death through a system of the term care raised satisfaction of patient and his family and nurse.

### **1 3 . Effects of Cognitive Therapy: Nursing Research Published in English, 1995-2001**

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The purpose of this study was to review nursing research on the effects of cognitive therapy in order to describe the ways in which nurses were using cognitive therapy and describing its effects. The Pub Med and CINAHL databases for the period 1995-April 2001 were searched using the key words cognitive therapy and nursing. Twenty-one papers met the criteria for inclusion in the review: papers were in English and were research reports. Seventeen studies used experimental, quasi-experimental, or case study designs to show the effects of cognitive therapy. Participants in the studies were being treated in outpatient clinics, including those in the community. They had either psychiatric or physical diseases. Four studies were about related topics. Cognitive therapy was being used for a variety of patient problems and situations. The details of the therapeutic programs and evaluative measures differed accordingly.

Key words: cognitive therapy, nursing, literature review

## 1 4 . The Association of Activities of Daily Living and Indices of Mental Status with Subsequent 20-year All-cause Mortality in a Japanese Elderly Population

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### Purpose

To examine the associations of activities of daily living (ADL) and indices of mental status with the risk of subsequent mortality in a Japanese elderly population.

### Design

Prospective cohort study.

### Participants

725 men and 984 women aged 65 years and older at the baseline examination in 1976-1977,

### Measurements

Demographic data, levels of disability in ADL, and indices of mental status including self-rated health (SRH), dementia, and depression.

### Main outcome measures

The subsequent 20-year all-cause mortality.

### Results

1) Disability in ADL and several indices of mental status (I.e., bad SRH, high dementia score, less pleasure, less moral, and tears-prone) were significantly associated with increased risk of subsequent 20-year all-cause mortality. 2)The risk of all-cause mortality among people who have no disability in ADL with each of bad SHR, less pleasure, high dementia score, and less morale was similar to that among people who have some disability in ADL with each of good SHR, more pleasure, low dementia score, and high morale, respectively.

### Conclusion

There were strong associations of levels of disability in ADL and several indices of mental status with subsequent mortality. Good mental status may improve longevity even when elderly people have some disability in ADL.

## 1 5 . Development of a Preventive System for Dehydration Management Among Elderly Patients

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### Purpose

Dehydration may reduce level of independence and quality of life (QOL) among elderly people, and may also contribute to earlier death. Dehydration may be due to inadequate water volume in the body, imbalance between water and salt and/or reduced sensory function. Moreover, among elderly patients with disability and/or disease who are receiving treatment and care the treatments themselves and/or the care environments may actually cause dehydration. Usually elderly people are unlikely to complain of dry mouth or dry sensation in the mouth.

The specific aims of this research were to study signs and symptoms of dehydration among hospitalized elders and to review literature relevant to assessment and prevention of dehydration. The ultimate purpose was to establish a preventive system for dehydration management that could be included in a series on nutritional care management (NCM) for the elderly.

### Methods

1. Clinical investigation. Consenting inpatients aged 65 years and over at one hospital provided the data for this study. Data included results of hematological analysis, patient's background and health conditions, and presence of physical signs/symptoms of dehydration. Logistic regression analysis was used to calculate age/sex-adjusted odds ratios and identify relationships between hematological data and the other factors.

2. Literature review. Two databases, Igaku-Chuo Journal (Medical Central Journal) and MEDLINE, for the years 1970 and 1980 to 2000, respectively, were searched using the keywords 'dehydration' and 'elderly'. A total of 37 reports were reviewed.

### Results

1. Clinical investigation. Excluding patients whose blood could not be collected and those with hyponcotic dehydration, data from 274 elderly patients were analyzed. These patients were 80 men and 194 women (29.2% and 70.8% of the sample respectively), mean age 81.8 years. Serum sodium levels were elevated ( $>145\text{mEq/l}$ ) in 12 patients (4.4%) and serum osmotic pressure was elevated ( $>295\text{ mOsm/l}$ ) in 161 patients (58.5%). Among patients with elevated serum sodium levels the odds ratios for the factors "use of diuretic" and "oral hygiene problem" were high. In contrast, among patients with elevated serum osmotic pressure the odds ratios for the factors "female," "use of laxative/enema," "aged 85 years and over," "oral intake," "diabetes" and "higher score on the Barthel Index" were high. Analysis of the symptoms/signs showed higher odds ratios for the factors "dry mouth and lips," "dry or fissured tongue" and "reduced skin tension" among patients with high serum sodium levels and higher odds ratios for the factors "dry skin," "dry mouth and lips," "sensation of cold skin," "weak

pulse" and "high respiratory rate" among patients with high osmotic pressure.

2. Literature review. Risk factors associated with dehydration in elderly people have been identified in USA since 1980. In 1991, the obligation of professionals to detect dehydration signs and causes in an early stage as well as to prevent dehydration was recognized and criteria for nutritional assessment to prevent dehydration were set forth for residents receiving long-term care. Methods for dehydration management for elderly people were identified.

#### Conclusion

On the basis of the findings a preventive system for dehydration management was developed and issues for future consideration were identified.

## **1 6 . Development of Telenursing System to Monitor of Daily Life and Symptoms for Home Oxygen Therapy Clients**

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St. Luke's College of Nursing

To meet their long-term care needs and improve QOL of patients who have chronic respiratory failure and use home oxygen therapy ( HOT ), I have developed a telenursing support system. Computerized communications are used for daily monitoring and health management focused on early signs symptoms of acute exacerbations.

The system consists of interactive communications between the server computer the telenursing center and a terminal unit set in the homes of clients. 21 questions referring to symptoms of acute exacerbations and daily life and mental information are dispatched from the server once or twice a day. Clients respond by selecting one answer choice for each question and pressing it on the touch panel. Responses are forwarded automatically to the server ; data are processed and analyzed simultaneously. Literature - based algorithms analyze client responses and trigger individualized messages ; an alarm is produced for serious signs. Messages include specific directions about therapy, exercise and getting physician care immediately. To make operation of the terminal easier for elderly persons a voice response unit is included.

Two trials have been conducted. The first, with healthy men, demonstrated system function. The second, with men over 70, demonstrated system feasibility for the elderly. The next steps are trials with HOT patients to determine the effectiveness of the telenursing support system for preventing acute exacerbations and coping with long-term care.

Edited by :

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