



Annual Report Form, WHO Collaborating Centres for Nursing and Midwifery Development

Annual Reports must be submitted by WHO Collaborating Centres for each year of their current designation period. This report is collected by and forwarded to the Office of Nursing and Midwifery (NMO), World Health Organization, Geneva, Switzerland to evaluate and provide comments on a centre's performance as well as information on WHO's input and the use made of the collaboration. The deadline for completion of the report is 31 March for each calendar year.

Technical note: You may report up to ten major activities for the past year.

Contact information

1) Title of the Collaborating Centre

WHO Collaborating Centre for Nursing Development in Primary Health Care

2) Institution/University/College Name

St. Luke's College of Nursing

3) Name of the school/department/unit etc., which acts as the WHO Collaborating Centre

St. Luke's College of Nursing

4) Head of the WHO Collaborating Centre

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11) Last designation

March 15th, 2004

12) Next Redesignation due

March 14th, 2008

Institutional characteristics

1) Is your institution? (Please select one)

Public Private Mix

2) Is your institution a (or part of a)? (Please select)

- University
- Hospital
- Research institute
- Ministry
- Academy
- Other kind of institution

3) Is your source of funding? (Please select one)

Public Private Mix

4) What proportion of your funding was from the regular budget over the past 2 years? (Please select one)

- 0-25% regular (core) funding
- 26-50% regular (core) funding
- 51-75% regular (core) funding
- over 75% regular (core) funding

5) Actual number of support staff employed by the Centre

9 persons

6) Capacity building/training courses provided by the Centre (please select all that apply)

- Initial technical/vocational training
- Undergraduate training
- Graduate training
- Continuing education/professional training
- Distance/e-learning

Terms of Reference

1) Terms of Reference (TOR)

- (1) To develop and evaluate models for nursing in primary health care for an aging society in a developed country.
- (2) To identify and promote nursing leadership in primary health care
- (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.
- (5) To influence governmental and professional agencies to promote nursing leadership in the development of primary health care.
- (6) To support international collaboration in nursing education, research and practice related to primary health care.

Implementation of work plan 1

Work performed in relation to Terms of Reference, and for each main activity.

1) Name of the activity

Japanese Geriatric Care Project / Community-Based Palliative Care (Hospice Care at Home) Project

Regarding the Terms of Reference (1) To develop and evaluate models for nursing in primary health care for an aging society in a developed country.

2) Description how the activity was implemented

Japanese Geriatric Care Project :

During the current fiscal year, we increased our research team's capability to respond to public needs by adding researchers with working experience as social welfare counselors, home care support center counselors, and rehabilitation nurses.

I. Japanese Interdisciplinary Team Approach: Establishment of education center for students and professionals

1. Information dissemination
2. Educational Program for the elderly, their families, and caretakers in the community
3. Educational Program for students pursuing a career in healthcare and welfare
4. Identifying community needs and establishing program

II. Development of remote nursing support system for the health care of the elderly

We continued a study on the trial use of a remote nursing support system for monitoring patients on home oxygen therapy and those with chronic respiratory insufficiency.

Community-Based Palliative Care (Hospice Care at Home) Project :

During the current fiscal year, we constructed a community-based palliative care system in addition to developing a fostering program for citizen volunteers and conducting surveys for establishing palliative care team standards.

As part of the fostering program for citizen volunteers, we held a workshop last December.

Based on the opinions and other exchanges there, we held a study meeting for care managers of the Chuo Ward, Tokyo in June, and a home hospice volunteer care seminar from June to September for "building a community for spending one's last days at home."

3) Publications and other relevant outcomes

Presentations at conference :

Development of a "Tele-nursing" System for Patients with Home Oxygen Therapy.

International Conference of Community Health Nursing Research, Sep. 2005.

Booklets :

A guide for home oxygen therapy: 1. Respiratory Mechanism and Respiratory Diseases, 2. Starting Home Oxygen Therapy, 3. Leading Stable Home Care Life, 4. Physical Examination, 5. Usage of Remote Nursing Support System for Home Oxygen Therapy (LMS-HOT), 6. Home Care Diary for Improving Respiration

4) Evaluation of the activity (e.g., by participants, other formal means)

Japanese Geriatric Care Project :

Data accumulated thus far and results of interviews with users indicated that this system helps enhance the self-management awareness of respiratory failures by easy operations, is effective for understanding bodily changes in oneself, and is also psychologically effective for reducing anxiety.

We have also started reviews for developing a regional general practitioners-patient remote nursing support system, and are currently preparing the protocols for running the system

Community-Based Palliative Care (Hospice Care at Home) Project :

In the future, we hope to ask team members involved in the approximately 3,000 patients who died of terminal cancer using visiting nurse stations, about information sharing methods and relation between members, and establish standards for palliative care team to facilitate death at home.

5) Difficulties encountered (if any)

Implementation of work plan 2

Work performed in relation to Terms of Reference, and for each main activity.

1) Name of the activity

Systematic Development of Home Care Program for Children with Chronic Illness
Regarding the Terms of Reference (1) To develop and evaluate models for nursing in primary health care for an aging society in a developed country.

2) Description how the activity was implemented

This project aims to systematically develop a local care program which effectively coordinates the children, their families, medical practitioners, social workers and teachers, to ensure that quality home care is provided for children with disability and chronic illness.

Research Progress and Outcome

(1) In order to gather fundamental data about children with chronic illness and disability in three selected communities of the Kanto area, we collected and analyzed the existing data, while conducting a questionnaire survey to identify the needs of the children and their families.

(2) In three districts, focus group interviews were conducted by nursing personnel including nurses in inpatient/outpatient wards, health outreach workers, visiting nurses, teachers for disabled children, to analyze the present status and issues of nursing care for children with chronic illness.

(3) Based on the results, we launched the following activities, tailored to the needs of each community.

3) Publications and other relevant outcomes

In two out of the three districts, we created and distributed a leaflet for nurses so that they can understand more about social resources to promote cooperation between the medical, welfare, and educational sectors. This is gradually being used at medical institutions. To promote the use of the leaflet and care, we also hold informal gatherings of nursing personnel.

4) Evaluation of the activity (e.g., by participants, other formal means)

This research is carried out closely with the local community based on surveys of the needs of children with chronic disease and their families in three districts. It is conducted mainly by nursing personnel while appealing to associations of families with children with chronic diseases, and has not reached the level of active participation by the general public. As efforts for children with chronic diseases focusing on the local community are still few, survey results are presented at conferences, etc. Based on the present evaluation results, information will also be presented to the international community.

5) Difficulties encountered (if any)

Implementation of work plan 3

Work performed in relation to Terms of Reference, and for each main activity.

1) Name of the activity

Creation of Digital Contents of Health Resources and an E-Learning Program / Utilization and Evaluation of People-centered Nursing Services
Regarding the Terms of Reference (2) To identify and promote nursing leadership in primary health care

2) Description how the activity was implemented

Creation of Digital Contents of Health Resources and an E-Learning Program :

The evidence of project research outcomes should be established as contents to distribute to the general public and nursing personnel. In this project, these issues are reviewed and a website is constructed to provide clear-cut information on evidence developed or to be developed by this school for the general public and nursing personnel.

The website “Kango-net” was built to make available online our research outcomes and other data, and to interact with the general public and nursing personnel. This site aims to contribute to the promotion of public health by providing information on health accumulated by nursing personnel and forum for exchanges.

Utilization and Evaluation of People-centered Nursing Services :

- 1) Research activities and International Relay Symposium
- 2) Gathering of information from California Nursing Outcomes Coalition (CalNOC) Project
- 3) Dissemination of “Bits of Knowledge for Receiving Good Care” and Compilation and Distribution of Brochures for Effective Utilization of Medical Organizations

3) Publications and other relevant outcomes

“Kango-net” website

<http://www.kango-net.jp/>

“Bits of Knowledge for Receiving Good Care” at the “Kango-net” site

<http://www.kango-net.jp/mame/index.html>

4) Evaluation of the activity (e.g., by participants, other formal means)

Creation of Digital Contents of Health Resources and an E-Learning Program :

In the review of accesses to the “Kango-net” website, the importance of ease in understanding the information posted there is highlighted, and the contents of “What is nursing”, which is indeed much more basic knowledge required before consulting evidence, are drawing interest. In addition, to evaluate sites and contents focusing on points that cannot be tracked from just access logs, we are planning to investigate site evaluations for which questionnaire replies can be obtained on site to further clarify user needs.

Utilization and Evaluation of People-centered Nursing Services :

- 1) Although needs for medical services by the general public are growing clearer and clearer, public knowledge on nursing care is nearly nonexistent, and we have still not reached the stage of public-initiated participation. There is a need, therefore, to provide information to the public to further promote collaboration, as well as a need to review the methods for this.
- 2) Because studies on nurse staffing and outcome indicators have yet to be established as of now, they may become very unique and have high scientific value (EBP). It is possible to lobby the government to include the research results of CalNOC in national policies in Japan. We need to specifically review how to produce the required research outcome while working with the public. Finally, it will be essential to review the methods of partnering with CalNOC to disseminate information to the international scene from Japan.

5) Difficulties encountered (if any)

Implementation of work plan 4

Work performed in relation to Terms of Reference, and for each main activity.

1) Name of the activity

Nursing Techniques for Supporting Daily Life
Regarding the Terms of Reference (2) To identify and promote nursing leadership in primary health care

2) Description how the activity was implemented

I. "Let's learn about our body" caravan

1. Increasing project members
2. Proposal of educational programs for 5-year olds
3. Survey of 5-year-olds' knowledge of their body
4. Review of evaluation method of learning programs

II. Development of Nursing Techniques for Supporting Daily Life

We developed and introduced a care program for helping patients sit upright in the acute cerebrovascular ICU. We are currently examining the usefulness of the program.

3) Publications and other relevant outcomes

Presentations at conferences :

Development of educational materials for children to learn about their body, St. Luke's Society for Nursing Research, 2005.9

Review on intestinal function regulation by the technique of hot fomentation on the lumbar region, Japanese Society of Nursing Art and Science, 2005.11

Response to excretion by the back: technique of hot fomentation on the lumbar region attempted during renal dialysis: Review of six cases, Japanese Society of Nursing Art and Science, 2005.11

Effects of vapor heat on abdomen by vapor heat sheet, Japanese Society of Nursing Art and Science, 2005.11

Changes in skin temperature and bowel sounds by the technique of hot fomentation on the lumbar region using a hot cloth wrapped with plastic, Japanese Society of Nursing Art and Science, 2005.11

4) Evaluation of the activity (e.g., by participants, other formal means)

1. Increasing project members

The first thing we did was increase the size of our study group to 24 members, with new members comprised of: specialists from actual education environment, those interested in this theme, and undergraduate and graduate students.

2. Proposal of educational programs for 5-year olds

We prepared a draft 15-minute educational picture story called "How an Apple becomes a B.M." based on the picture storybook of the digestive system we compiled last year. We are planning to use and evaluate this at kindergarten, and add any revisions required.

3. Survey of 5-year-olds' knowledge of their body

All except one knew about their internal organs such as brain, muscle, bone, heart, and blood. In

the future, we are planning to increase the number of subjects to help the development of learning programs for five-year-olds.

4. Review of evaluation method of learning programs

We also reviewed literature to determine at what point learning programs developed in this study should be evaluated, and the evaluation method.

5) Difficulties encountered (if any)

Implementation of work plan 5

Work performed in relation to Terms of Reference, and for each main activity.

1) Name of the activity

Women-centered Care / Development of Women-centered Care Guidelines Building of Women-centered Care Models for Infertile Women
Regarding the Terms of Reference (3) To update standards of nursing education and practice to implement primary health care.

2) Description how the activity was implemented

Women-centered Care :

1. Developing Women-centered Care Guidelines for Victims of Violence against Women
The primary goal of this project is to develop and disseminate guidelines to support victims of violent crimes against women in clinical settings.

RESEARCH ACTIVITIES 2003-2004

1) To develop guidelines; Women-centered Care Guidelines in Japan for domestic Violence in the Perinatal Period, Using Evidence-based Medicine Methods.

2) To develop an effective screening method and assessment methodology to identify victims.

2. Care for Mothers of Stillborn Babies

The primary goal is to develop, practice, and evaluate care required by mothers of stillborn babies, as well as provide education to nurses and midwives.

RESEARCH ACTIVITIES 2004-2005

1) To identify the nursing care needs of mothers, who experienced stillbirth

2) To practice and develop self-help group meeting in order to express grief work and to foster psychological support for mothers who shared the same experiences.

3) To build relationships and nursing profession collaboration with laypersons who experienced stillborn babies; helping other mothers for long periods.

Development of Women-centered Care Guidelines Building of Women-centered Care Models for Infertile Women :

1. Individual approach for reducing stress of patients

1) Developed two programs for infertile women to cope with stress, and conducted an intervention study. Data collection was completed as of the end of August 2005.

2) Provided individual consultations using e-mail. Provided 10 consultations from January to September of 2005.

2. Group approach for providing information and education to patients and nurses

1) we held a seminar for the public "Importance of Informed Choice in Infertility Treatment" at St. Luke's College of Nursing. With journalist Atsuko Masano as the speaker, who has received infertility treatment, it was participated by about 70.

2) we worked together with the Japanese Society of Infertility Nursing to hold a hands-on infertility nursing seminar "Nursing for Couples where Men are Cause of Infertility" at the University of Marketing and Distribution Sciences. Attendance was about 50 participants.

3) the project leader was invited to the annual conference of the Fertility Nurse Group, the Royal College of Nursing, London UK to talk about "The Role of Fertility Nurse in Japan."

3. Joint development of the booklet on informed choice of infertility treatment with a self-help group

We co-wrote a 16-page booklet "It's My Choice to Opt for Infertility Treatment: A Choice that Suits Me" with the self-help group "finrrage-no-kai."

4. Investigating possible partnerships between medical personnel and patients who have experienced infertility treatment

This was another new project which established a network of infertility nurses and journalists (including patients).

3) Publications and other relevant outcomes

Women-centered Care :

Guidelines

Women-centered Care Guidelines in Japan for domestic Violence in the Perinatal Period, Using Evidence-based Medicine Methods.

Development of Women-centered Care Guidelines Building of Women-centered Care Models for Infertile Women :

Akiko Mori, Naoko Arimori, Masako Momoi, Shigeeko Horiuchi, and Noriko Fukuda:

Application of Needs Focus Group Interview of Women Receiving Early Infertility Treatment in Care Program for Reducing Stress, Japanese Society of Infertility Nursing Journal, 2(1): 12-19, 2005.

Seminar :

"Importance of Informed Choice in Infertility Treatment"

"Nursing for Couples where Men are Cause of Infertility"

Booklets :

"It's My Choice to Opt for Infertility Treatment: A Choice that Suits Me"

4) Evaluation of the activity (e.g., by participants, other formal means)

Women-centered Care :

1. Developing Women-centered Care Guidelines for Victims of Violence against Women
RESEARCH PLAN 2005-2007

To practice and evaluate using the first guidelines at pilot hospitals.

Action Research: To grasp current situation, revise the guidelines according to actual situation of pilot hospitals, provide education to medical staff, practice and evaluate care using the guidelines.

To revise the first to develop the second guidelines based on actual experience and evaluation at model hospitals.

2. Care for Mothers of Stillborn Babies

RESEARCH PLAN 2006-2007

To educate nursing professionals, develop and evaluate education programs to perinatal nursing staff, invite mothers of stillborn babies who are the supporters of the education program to participate in the program, and spread and evaluate model self-help group meetings.

Development of Women-centered Care Guidelines Building of Women-centered Care Models for Infertile Women :

The response to the booklet in research activity #3 was very good. It was broadcasted through the program "Infertility Treatment 2005" by NHK Radio 1 on July 18, 2005. The project leader participated in the show which was aired nationwide. The booklet was also distributed to medical providers who participated in annual assemblies of the Japan Society of Fertilization and Implantation on August 4 and 5, and Japanese Society of Infertility Nursing on August 27. It was also distributed to those who have experienced infertility treatment during the event "Let's Talk about Infertility! 2005" sponsored by finrrage-no-kai on September 3. An article of the booklet with a picture of it was carried in the morning edition of the Mainichi Newspaper on September 15 in the lifestyle section, attracting 400 calls from patients and families around the country for a copy. Questionnaire replies indicate that the contents of the booklet are indeed sought by both infertility patients and medical personnel. Currently, we are analyzing data of the intervention study.

5) Difficulties encountered (if any)

Implementation of work plan 6

Work performed in relation to Terms of Reference, and for each main activity.

1) Name of the activity

Creation and Dissemination of Genetic Nursing in Japan / Development of a Care Provisioning System for Multi-disciplinary Approach to Cancer Nursing / Development of a Program Aiming to Recover Fitness of Cancer Survivors / Development and Implementation of an Effective Health Education Program Appropriate for Japan-Specific Characteristics

Regarding the Terms of Reference (3) To update standards of nursing education and practice to implement primary health care.

2) Description how the activity was implemented

Creation and Dissemination of Genetic Nursing in Japan

I. Genetic medicine and care

(1) we translated and distributed (100 copies) of the 2004 “Medical Personnel Guidebook on Risk Assessment for Prenatal Diagnosis (Panel)”. We also held a seminar, “Current Situation and Challenges of Familial Breast Cancer Counseling in the U.S.” in conjunction with the Japanese Society of Genetic Nursing.

(2) We implemented “education on life”, carried out mainly by midwives, for children to experience birth at elementary schools. (2 elementary schools, about 150 pupils).

(3) To promote the awareness of diversity in human beings, we distributed 300 copies of the “Down Syndrome Children Calendar” to the staff of nursing universities, undergraduate and graduate school students to promote understanding of children with chromosome aberration.

(5) In genetic nursing education, we distributed the booklet “Practicing Genetic Nursing in Japan” to 500 genetic medicine related facilities in the country to promote genetic nursing.

II. Decision-making support

(1) During the International Relay Symposium under the theme “For living a life of your own choice,” we created an opportunity for medical personnel to learn from the experience of the public on decision-making support in medicine, and share knowledge on pioneering activities overseas with the public. Information on these activities are published in a nursing journal.

(2) We translated the “Ottawa Individual Decision-Making Guide” as a tool for supporting decisions from various perspectives in life without limiting it to people with health issues.

(3) We also translated the decision conflict scale and reviewed the reliability and suitability of the scale.

Development of a Care Provisioning System for Multi-disciplinary Approach to Cancer Nursing

The aim of this project is to develop a care providing system model on the multidisciplinary approach to nursing cancer patients, taking into consideration the background and state of cancer treatment in Japan.

Specifically, in this project, based on the partnership between patients receiving advanced breast cancer treatment, their families, and health medical experts providing care, the following are being carried out: 1) Propose the importance of forming partnerships between breast cancer patients and experts, and review the ideals of realistic cancer treatment; 2) Based on actual partnerships, propose care providing system models for cancer patients to control and use information and resources required for living with treatment and cancer, make satisfactory decisions, and continue with the treatment; 3) Implement new care providing systems based on partnerships and review the practical use and suitability of the system.

(1) Current situation of emerging breast cancer team medical care

(2) Comments of women using breast cancer team medical care

(3) Extensive discussion on patient-centered breast cancer team medicine

(4) Currently considering “care system models aiming at patient-centered multidisciplinary approach for breast cancer”

Development of a Program Aiming to Recover Fitness of Cancer Survivors

1. In the development of an exercise program, we will inspect methods of running physical programs for enhancing the QOL (quality of life) of the general public (elderly patients), and maintain and enhance physical activity ability and functions. Based on these results, we will extract elements to be considered.

2. In the review of literature on physical programs in the U.S. and Europe for cancer patients,

we will search literature covering the following themes as much as possible, and review current and future tasks: aims and goals of physical therapy, conditions for selecting subjects, pre-function evaluation methods of subjects, assessment of physical ability pre-evaluation and setting of physical level, fitness conditioning (type, frequency, strength, duration, method of recording, verification method of exercise implementation), evaluation indices (questionnaire, measuring tools), strategies for reducing the dropout rate of subjects, etc.

3. Using multiple classification analysis, clarify the lower extremity muscle strength of patients receiving hematopoietic cell transplantation (hereafter transplantation), changes in muscular power of lower limbs and subjective view of physical conditions, and their relationships for up to one month after discharge from hospital.

Development and Implementation of an Effective Health Education Program Appropriate for Japan-Specific Characteristics

(1) By promoting the development of tools for recording one's own lifestyle daily with ease and being able to read it back objectively, this research provides an environment for people to know the characteristics of their daily lifestyle, reach an understanding of what improvements to make, and enjoy self-learning.

(2) By building a comprehensive community sports clubs in Tsukiji and Akashi-cho (Tokyo) that provide advice and assessment services from medical specialists to prevent and control adult diseases, this research contributes to a lifestyle habit where the public has the option of comfortably incorporating sports into their lives several times per week or more.

(3) By implementing seasonal programs for people to spend their holidays enjoying outdoor recreational activities and sports while staying at facilities plush with nature, this research provides opportunities to re-evaluate daily lifestyle habits, recognizing the importance and value of life and health.

3) Publications and other relevant outcomes

Seminar :

“Current Situation and Challenges of Familial Breast Cancer Counseling in the U.S.” in conjunction with the Japanese Society of Genetic Nursing.

“education on life” at elementary schools. (2 elementary schools, about 150 pupils).

Symposium :

“For living a life of your own choice”

Translation :

Guidebook “Medical Personnel Guidebook on Risk Assessment for Prenatal Diagnosis (Panel)”.

“Ottawa Individual Decision-Making Guide”

The decision conflict scale and reviewed the reliability and suitability of the scale.

4) Evaluation of the activity (e.g., by participants, other formal means)

Creation and Dissemination of Genetic Nursing in Japan

Through the four years of the project, we will have the public participate from the final care planning stage, and then have the public evaluate the care, and establish a circulatory model which links this to new care. This year, marking the second year of the project, we should be able to establish genetic nursing education for sharing problem awareness on genetic medicine with the public and evaluate the effects of the decision-making tools developed.

Development of a Care Provisioning System for Multi-disciplinary Approach to Cancer Nursing

- We proposed a care system model incorporating structural and functional elements for patient-centered cancer medical system, for care to be applied at the clinical site. The system will be installed in the medical scene and evaluated.
- As information system tools and media for operating these included in the care system model, care guidelines, care pathways, self-care kits, and care outcome will be created, and an information system for access and exchange by both patients and medical personnel will be proposed.
- Tools and mechanisms for continuing quality assurance of “patient-centered cancer medical system” will be discussed.
- Network with resource persons propelling patient-centered cancer medical systems will be born. Through cooperative activities with these people, policies to rouse reforms in patient-centered cancer medical care will be proposed.

Development of a Program Aiming to Recover Fitness of Cancer Survivors

1. We toured the power rehabilitation program for the elderly in Kawasaki City, Kanagawa Prefecture. It was suggested that the goals of the physical program for cancer patients be set at invigoration of the body, mind, and motivation which promotes adjustments of social lifestyle; and instead of targeting temporary functional enhancement, goals should be set so that exercise is incorporated in daily life and exercise be continued based on one’s own efforts.
2. Referring to the results of the tour in 1, continue reviewing literature for establishing the outline of this program.
3. In the long-term sedentary lifestyle of patients receiving transplant, the muscle strength of ankle joints especially decreases, resulting in reduced physical balance. Thus patients experience gait heaviness and weakness even after discharge from the hospital, which is thought to cause delayed recovery of physical ability. It is also suggested that after leaving the sterile room, early rehabilitation with little physical burden of mainly the ankle joint is necessary for preventing reduced muscle strength of the lower extremity in these subjects.

Future Course

We will review literature and tour facilities implementing the program in the U.S., and based on this, we will develop a program which incorporates the preferences of subjects, and guide them to become fit on their own.

Development and Implementation of an Effective Health Education Program Appropriate for Japan-Specific Characteristics

In the current fiscal year, we conducted the following three health education programs according to this study’s objective (3) to convey the importance and value of life and health through outdoor activities for experiencing nature.

- (1) Family Camp to Experience the Budding of Life
- (2) Family Camp to Experience the Joys of Harvest
- (3) Health Education Program during Long-Term Children Camp 2005 for Experiencing Life, Nature, and Oneself

Currently, we are attempting to objectively verify the effects of these programs.

5) Difficulties encountered (if any)

Implementation of work plan 7

Work performed in relation to Terms of Reference, and for each main activity.

1) Name of the activity

Strengthening societies of research in nursing science in Japan
Regarding the Terms of Reference (4) To facilitate research development relevant to nursing by identifying research priorities and developing research networks.

2) Description how the activity was implemented

There are thirty societies of research in general nursing science as well as specialized area of nursing. Four faculty members of our center are working for five research societies in Japan in 2005. In Japan, an association of the research societies in nursing was established and named Japan Society of Nursing Science (JSNS) in 2001. JSNS is working for sending a representative from nursing science to Japan Academy of Science. Our faculty members of the center are working for each of nursing societies as well as for JSNS.

One of the major research societies, Japan Academy of Nursing established in 1975, started the first English journal titled Japan Journal of Nursing Science in June, 2004. The aim of start the JJNS is to make Japanese Nursing Scientists easier to publish their research reports for international readers. Our faculties are working for editing the JJNS as chair of editorial committee and editors of this journal.

3) Publications and other relevant outcomes

In December 2005, Vol 2, No2 of the Japan Journal of Nursing Science was published. Information regarding nursing research has been delivered both by printed matter as well as e-journal.

4) Evaluation of the activity (e.g., by participants, other formal means)

One of nursing scholars in Japan, Dr. Hiroko Minami was elected as a member of Academy of Science Japan in 2005.

5) Difficulties encountered (if any)

It is still difficulty for Japanese nursing researchers to write reports of their research in English. Now, a writing seminar is being planned for Japanese nursing researchers.

Implementation of work plan 8

Work performed in relation to Terms of Reference, and for each main activity.

1) Name of the activity

Strengthening governmental policy influence in nursing in Japan.

Regarding the Terms of Reference (5) To influence governmental and professional agencies to promote nursing leadership in the development of primary health care.

2) Description how the activity was implemented

Faculty members of our center are working for the Ministry of Health and Labor in Japan; President Dr. Toshiko Ibe is working for the subcommittee of Council of Long-term Care Insurance as a representative of Nursing and Midwifery profession, and Professor Mami Kayama is working for a sub-committee of license and license examination under the Ministry of Health and Labor in Japan. Because faculty members of our centre have been working for the Ministry of Health and Labor in Japan, they have been closely involved in government policy development.

3) Publications and other relevant outcomes

4) Evaluation of the activity (e.g., by participants, other formal means)

5) Difficulties encountered (if any)

Implementation of work plan 9

Work performed in relation to Terms of Reference, and for each main activity.

1) Name of the activity

International Cooperation in Nursing Practice.

Regarding the Terms of Reference (6) To support international collaboration in nursing education, research and practice related to primary health care.

2) Description how the activity was implemented

The center has accepted number of international groups or individuals from overseas and shared our experiences in nursing education, research and practice.

Trainees came from Uzbekistan (Nursing Administration), Mongol Nursing Association (Administration of the Professional Nursing Association), Afghanistan (Medical Education), Korea (Elderly Care) and other international groups (Nursing Administration).

3) Publications and other relevant outcomes

Almost all training programs were funded by the Japanese government through (Japan International Cooperation Agency). All trainees submitted and presented their action plans to be implemented at home countries in the end of these training programs in Japan.

4) Evaluation of the activity (e.g., by participants, other formal means)

In the end of each training program, we had discussion session with the participants.

The participants said that they could obtain specific ideas which they can apply to their own countries.

5) Difficulties encountered (if any)

Implementation of work plan 10

Work performed in relation to Terms of Reference, and for each main activity.

1) Name of the activity

a) Support and Collaboration of International Conferences in Asia

b) Exchange program between Yonsei University in South Korea, and Mahidol University in Thailand

Regarding the Terms of Reference (6) To support international collaboration in nursing education, research and practice related to primary health care.

2) Description how the activity was implemented

a) In May 2005, ICN Conference in Taiwan, WHO C.C. Global Network, executive meeting as well as other meetings was held. The director and associate director participated in this conference and the meetings. The faculty members of our center also participated in this conference.

In addition, we had the Regional WHO C.C. (WPRO) Meeting, with Yonsei University. Mahidol University, Thailand had an international conference. The center supported this conference by sending a key note speaker as well as giving presentations.

b) Students (undergraduate) exchange program (two weeks program) has started between Yonsei University and Mahidol University.

3) Publications and other relevant outcomes

b) The students presented and submitted a report regarding what they experienced and thought during the exchange program.

4) Evaluation of the activity (e.g., by participants, other formal means)

The reports or presentations of both our students and the visitor students indicated how the students learned differences and similarities of health care system and nursing, culture, and the people.

Faculty members evaluated these exchange program were very effective for the visitor students as well as host students and faculty members. In coming 2006, these exchange programs will be continued.

5) Difficulties encountered (if any)

The number of visitor students was limited because of financial as well as administrative issues. Each institution should prepare for financial base. Each institution should keep good communication regarding exchange program as well as exchange students.

Recommendations, where applicable, for:

1) Further implementation of the above activities

2) Revision of the Terms of Reference

Current terms of reference of WHO C. C. at St. Luke's College of Nursing include all aspects of nursing in PHC such as practice, education, research, policy making, international collaboration in nursing education, research and practice related to PHC. Therefore, WHO C. C. will work without any revision of the terms of reference.

3) Preparation for the Terms of Reference for the next designation period (4 years)

St. Luke's College of Nursing is being funded as a Center of Excellence, and developing the People-centered Care Model for Health Promotion during the next designation period until March 2008. The terms of reference should be focused further, the center will prepare for revised terms of reference.

4) Related activities (e.g., follow-up and monitoring)

Along with the progress of the People-centered Care Initiative for Health Promotion, St. Luke's is receiving reviews and suggestions periodically from domestic as well as international evaluators. Based on these suggestions and feedbacks from the evaluators, the research projects under the people-centered care initiative program will be strengthened and synthesized into a People-centered Care Model for Health Promotion.

Collaboration between the Centre and WHO

1) Visits by WHO staff (HQ and/or Regional Office) to the Centre

Nursing Advisor of WPRO, Kathleen Fritsch visited St. Luke's College of Nursing and WHO C. C. as an international evaluator of the Center of Excellence "People-centered Care Program".

2) Visits by the Centre staff to WHO (HQ and/or Regional Office)

Three staffs (Dr. Junko Tashiro, Yoshimi Yamazaki, Kazuko Naruse) visited to WPRO in Manila, Philippines, to participate in Informal Consultation on the Draft Regional Human Resources for Health Strategy, 21-23 November, 2005.

3) Use of the Centre staff by WHO

None

4) Support provided by Centre staff for courses cosponsored or organized by WHO (HQ and/or Regional Office)

5) WHO financial support to the Centre through contractual or Technical Services Agreement

None

6) Other type of support provided by WHO

St. Luke's College of Nursing is requesting Kathleen Fritsch (Nursing advisor of WPRO) to be an international external evaluator for the COE program, "People-centered Care Initiative for Health Promotion".

7) Any other collaborative activities (outside WHO but in the interest of WHO and/or the Centre)

8) Any difficulties encountered in all of the above collaborations?

It is rather difficult for WHO C.C. at St. Luke's College of Nursing to contact with nursing advisors of other regions of WHO when our Center works with those in Kenya, Afghanistan, Myanmar which are not with in the WPRO region.

9) Suggestions for increased and improved collaboration with WHO

To have more frequent meetings with WHO. It is really hard to find an occasion to communicate with nursing advisors in other regions.

10) Suggestions for increased and improved collaboration with other organizations

Collaboration with other WHO Collaborating Centres

1) Name(s) of other WHO Collaborating Centre(s) with which the Centre has collaborated

- (1) Yonsei University
- (2) Mahidol University
- (3) University of California at San Francisco
- (4) Colombia University
- (5) University of Illinois
- (6) Glasgow Caledonian University

2) Name of the network of Collaborating Centre to which the Centre belongs

- (1) Global Network

3) Nature of the collaboration

The collaboration of the network is facilitating exchange of information as well as human resources who have distinguished knowledge and skills.

4) Outcome(s) of the collaboration

Numbers of distinguished international guest faculty or speakers were invited for especially graduate education and faculty development as well as conferences as key note speakers.

5) Suggestions for increased and improved collaboration with other WHO Collaborating Centres

Participating at and organizing conferences, meetings and seminars

1) During the last 2 years, did your Centre participate at national conferences? (Please select one)

- None
- 1-3 meetings
- 4-6 meetings
- over 7 meetings

2) During the last 2 years, did your Centre participate at regional/international conferences? (Please select one)

- None
- 1-3 meetings
- 4-6 meetings
- over 7 meetings

3) During the last 2 years, did your Centre organize (or co-organize) national conferences? (Please select one)

- None
- 1-3 meetings
- 4-6 meetings
- over 7 meetings

4) During the last 2 years, did your Centre organize (or co-organize) regional/international conferences? (Please select one)

- None
- 1-3 meetings
- 4-6 meetings
- over 7 meetings