



Annual Report
St. Luke's College of Nursing
WHO Collaborating Centre for Nursing Development
in Primary Health Care
2009



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ANNUAL REPORT 2009

1. Name of the Centre

WHO Collaborating Centre for Nursing Development in Primary Health Care

2. Address

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3. Head of the Centre

Professor Michiko Hishinuma, Dean

4. Terms of reference of the Centre

- 1) To evaluate and develop further nursing practice models in primary health care (PHC) contributing to Millennium Developmental Goals as well as aging societies.
- 2) To identify and promote nursing leadership in primary health care.
- 3) To research, develop, and disseminate best practice examples with evidence in order to lead collaboration and empowerment of individuals and communities with regional and global peers, networks, and organizations.
- 4) To support research and system changes contributing to improve education and practice of nurses and midwives in PHC.

Brief Description of Main Activities.

Health Information Service Center for the Community

Health information center for the community will be further developed. The health information service center will provide resources (professionals and health volunteers) to enable people to obtain knowledge and skills enabling them to be confident and to control their health.

In 2009, the Health Information Center called “ Luke-Nave” provided the community a total of 21 programs including: health counseling, quick health examination (blood pressure, bone density, physical measurement and BMI) health information provision, open health library, lunch time mini health lecture, music concerts and relaxation tea lounge (herb tea, and tea ceremony). In addition, the center services participated in several events in our community such as health and social well-fare festival and other festivals in our community. We held a number of seminars for the community on health information including: "Hypertension and Prevention", "Osteoporosis and its Prevention", "Influenza and Prevention" and "Diabetes Mellitus and Prevention". The number of visitors exceeded 1,200 which is 5% more than the visitors in 2008. Currently 36 community health volunteers and 38 professional volunteers are serving for this center. We provided preparation classes as well as continuing classes for health volunteers. Responsibilities of health volunteers are now expanding from indirect support to direct service for the community visitors. The project has accepted an increase in numbers of undergraduate as well as graduate students for practice. The staff as well as health volunteers mentor the students. Although activities of this project have expanded, an index of outcomes of this project should be identified and measured to indicate effectiveness of this institutional practice in this particular community.

聖路加健康ナビスポット：るかなびの紹介



「心とからだの健康相談」 「るかなび」はこんなところですよ。

聖路加健康ナビスポット「るかなび」は、看護大学が開いています。健康・からだ・病気のことなど、普段ちょっと気になっていることを相談できる場所です。

「るかなび」のスタッフ(看護職など)は、利用される方との一対一の面談を通して、気になっている健康問題を、一緒に考える姿勢を大切にしています。また市民と看護大学の交流の場として、地域に根付いた活動に取り組んでいきたいと考えています。ミニ健康講座や、ミニコンサート、ハーブティー、茶道などのイベントも定期的に行っております。どなたでも、無料でこれらのサービスを利用いただけます。

場所は、東京メトロ日比谷線築地駅から徒歩で2分、聖路加看護大学2号館の看護実践開発研究センター1階です。

まずは、一度お越しください！

[るかなびのホームページ](#)

東京都中央区築地3-8-5 [地図はこちら](#)



Interdisciplinary Elder-Centered Care Model

The Elderly-Centered Care Model based on an interdisciplinary approach will be developed

Purpose: To examine the progress and outcomes of intergenerational interactions among and between older people and children in a weekly intergenerational day program (IDP) in an urban community, and to evaluate the elder's health related quality of life (HRQOL), depressive symptoms compared to program volunteers and children's perspectives of older people, during the first six months of program implementation.

Methods: This longitudinal study with a convenience sample including older people (n = 14), program volunteers (n = 8) and school-age children (n = 7) was conducted by using mixed methods. Participant observations and interviews were used to describe the interactions between generations and over the six months, and an analysis of variance with repeated measures was used to examine the statistical effect over time (initially, three and six months). The instruments used were the HRQOL (SF8TM) and the Geriatric Depression Scale (GDS) -15. Semantic Differentials provided data for identifying children's perspectives of older people.

Results: Intergenerational interactions were grouped into 13 categories for example: 'IDP provided a meaningful sense of place'. The older people's group mental health QOL improved significantly between the first involvement and after six months. GDS-15 scores were significantly decreased at the three time points in the more depressed older people's sub-group. The children's initial generally positive perspectives of older people showed no statistically significant changes over time.

Conclusions: IDP intergenerational interactions yielded a meaningful place for both generations and improved health related QOL, decreasing depressive symptoms, in the more depressed sub-group.

Community Based Palliative Care (Hospice Care at Home) Project

A community-based palliative care system named “Building a Community for Spending One’s Last Days at Home” will be further developed with the collaboration of community lay persons.

Project leader Dr. Masako Yamada

We, home visiting nurses and social workers, formed a group named “First Step for the Tomorrow” consisting of volunteers who finished a training course on hospice care. We, professionals and hospice volunteers had been working as a team in a community. In 2009 there were 25 working members. And provided home visiting care including communicating and monitoring health status for four elderly in the community. We shared our caring experience among members once a month, conducted case studies. In the end of 2009, we had compiled a service manual based on our experience and case study. For further development this project, we will start newsletter of this project and develop network in this community. In 2010, we are still continuing to further develop an activity standard and improve home visiting care with collaborative activity of professionals and community volunteers.

The Development of Child and Family-Centred Care in the Community

Support networks between children, parents, and medical/ social welfare/educational sectors will be developed further in order to ensure the quality of home care provided for children with chronic illness and disabilities.

The purpose of this program is to develop and enhance the Child-Family Centered Care, through an educational program for parents and children and for people whose work is related with children, sharing information and experiences about child's health.

The core members of this program were clinical nurses, public health nurses and school nurses. We held four seminars this year with parents and medical/ social welfare/ educational sectors related to children in this community. Those topics were; 1) first-aid and resuscitation for children, 2) children's life-style, body, mind and their brain, 3) health care for children in the winter, 4) development of the children's feelings- the correspondence to children with difficulties. This was the 6th year of the program. The number repeating the program increases every year and this year 140 people participated.

Participants evaluations were positive such as: a good atmosphere of the seminar; the possibility of the day care and the contents are clear to understand. We will continue this project and study how we can develop child and family-centered care in community

Development of Systematic Nursing Service Management Education

We will improve a management education system tailored to nurses at all levels and in all roles, from students to mid-level nursing administrators such as clinical nurses and ward supervisors to senior administrators such as deputy nursing managers and deputy hospital directors.

In 2009, the final year of research, the following research activities were conducted. First, in order to establish indicators of nursing administrators useful for provision of services, questionnaire items that incorporated the perspective of service management were added to and revised in the "NMMDS-j Ver. 1.1" that was developed in the 2004-2006 scientific research "Development of a database for providing nursing services and ensuring quality at medical institutions" (representative: Toshiko Ibe). New categories included the following six items: "planning", "motivation", "education", "communication", "organization", and "outcome". Next, a large-scale survey was conducted on nursing administrators at 3,000 hospitals nationwide to test the reliability and validity of the further revised questionnaire (hereafter, "revised MaIN"). While its reliability was confirmed, no clear relationships could be detected between factors such as the number of years of experience as administrators and MaIN scores, as had been observed in a survey conducted prior to revision. In addition, analysis of nursing administration textbooks used in basic nursing education in Japan, the U.S. and the U.K. as well as the syllabi of nursing administration courses in Master's programs in the U.S. and at nursing universities in Japan, suggested that the learning contents of nursing administration education in basic nursing education in Japan emphasized organizational structure and functions, and did not include many topics on marketing ideas or nursing administration research. In addition, learning contents in the U.K. and U.S. also did not deal extensively with marketing or nursing administration research. Based on the above results and the findings obtained over the previous two years, a proposal for the systematization of nursing administration education in basic nursing education using service management as a framework was drafted.

Use of Quality Indicators to assure midwifery care standards

Quality Indicators (QI) for use in evaluating standards of labor and delivery will be developed based on the perception of the clients and consumers.

Research about QI for fiscal 2009 was developed to determine the impact of amniotomy on spontaneous labour in uncomplicated pregnancies. A retrospective study was conducted to compare outcomes for low-risk primiparous and multiparous women with spontaneous labour at term having amniotomy or no amniotomy. Results indicated that amniotomy may shorten the progress of labour for the primiparous. A critical area to explore is the mother's childbirth experience and necessary medical interventions post-amniotomy.

Dissemination of Genetic Nursing Program

1. An educational program for children and parents sharing the information or experiences of their birthdays and discussing the importance of their lives will be developed, evaluated and reported.
- 2.3 We will conduct evaluation studies at schools, workplaces, and settings involved with genetic medicine in order to inform and develop future activities.

We produced two educational programs regarding heredity-related diseases to healthcare professionals and the general public with the cooperation of the Clinical Genetics Department, St. Luke's International Hospital and the WHO Collaborative Centre, St. Luke's College of Nursing. The first program was titled "Genetics and Diabetes", and the second "Understanding Women with Turner's Syndrome". In the first program, there were approximately 50 attendees and most of them were healthcare professionals. State-of-the-art information about genetic medicine was provided. The second program, "Understanding Women with Turner's Syndrome " was divided to two parts. The first part, "Turner's Syndrome as a Sex-Chromosomal Abnormality", was provided by healthcare professionals, with focus on understanding chromosomes. In the second part, a woman with Turner's Syndrome was invited to talk about the inconvenience of daily life and the experiences of school life. The nursing students delivered the message to the healthcare professionals from the Patients' Association. Through this program, not only the hospital, the healthcare professionals, but also the patients and the nursing students were able to come together to think about genetic problems. This was a trial program for the realization of the "People Centered-Care", and was highly evaluated by the attendees.

Dissemination of Health Resource Digital Contents and E-learning Program

E-Health Information via websites dissemination system and program will be further developed, and the impact and outcomes will be evaluated. Web2.0 trends and re-examining "Kango-net" will be reviewed.

Question and answers submitted to the Web 2.0 trend Q & A site were analyzed. Data showed that some information people wanted were not provided by the medical professional and people hesitated to ask them for it. Understanding how people get the required information and process their decision making enabled medical staff to provide better care . In Japan patients and families are confused because there are too much information and wrong information. To prevent these problems, the study found that patients and family must have health literacy and communication between patients & family and medical professional, are necessary.

The screenshot shows the homepage of '看護ネット' (Kango-net), a website for nursing professionals and the public. The page is organized into several key sections:

- Header:** '看護ネット' logo, search bar, and 'English' link.
- 看護コミュニティ (Nursing Community):** Promotes a 'よろず相談所' (Free Consultation) where users can ask questions and receive answers from nursing professionals.
- Nursing:** A central section providing general information about the website's purpose and services.
- イベント情報 (Event Information):** Features an 'イベントカレンダー' (Event Calendar) for upcoming events.
- お役立ちリンク (Useful Links):** A list of links to various nursing-related organizations, including nursing associations, universities, and research groups.
- アラカルト (A la carte):** A section for featured content, including a book recommendation '危険防止と安全な介護【脳卒中編】' (Prevention of Danger and Safe Care [Stroke Edition]).
- よろず相談所 (Free Consultation):** A detailed section with a list of topics for consultation, such as '血圧測定について' (About blood pressure measurement), '透析室看護師ですが、透析の認定看護師の制度がいまいち分かりません。' (I'm a dialysis room nurse, but I don't quite understand the certification system for dialysis nurses), and '妊娠治療について' (About pregnancy treatment).

Forming an Consortium for Facilitating International Nursing Collaboration Contributing to Obtaining the MDGs

A domestic consortium of faculty members in international nursing will be formed in order to share the information regarding international collaborations, and to standardized international collaborative works being provided by faculty members from each educational institutions in Japan.

For this study project we completed a design for a core curriculum of Global Health Nursing and Midwifery based on faculty teaching in this area. The study project will be presented at the Primary Health Care : VIII Conference held July 28th to 30th, San Paulo, Brazil. The abstract for this project is; [Purpose] In 2009, 20 (15%) programs for global or international nursing or midwifery out of 104 programs have been established and are providing education. The purpose of this study was to describe developmental needs of current master's programs of global or international nursing in order to develop them further and to increase the number of master's prepared Japanese nurses with expertise in and contributing to global health. [Method] The authors searched each web-site for graduate programs in global nursing in Japan, and developed an e-mailing list. We invited faculties of global nursing to become members of a network named "Consortium of Global Nursing and Midwifery in Japan" then and conducted a questionnaire survey on the current curriculum of each program including mission, subjects, credit hours, teaching methods and materials, and current issues of their program. [Result] Twelve (60%) faculties agreed to join the Consortium of Global Nursing and Midwifery master's programs. Our data indicated there were several educational goals including: to strengthen specialized ability for working in certain nursing projects of reproductive health, community, disaster; for collaborating development of practice and policy with evidence. Contents of courses reflected the mission of each educational institution. The majority of programs included process of international collaboration consisting of assessment, plan, and evaluation. Thus, a core curriculum was designed based on a compilation of programs. Faculties identified challenges to program execution such as shortage of faculty members; limited safe practical sites and uncertain number of applicants. [Conclusion] In Japan, master's programs of Global Nursing and Midwifery are still a minor specialty with international collaborating process a core subject.





2. Other information related to the collaboration between the centre and WHO.

Briefly describe visits by WHO staff to the centre, visits by the centre staff to WHO (HQ and/or Regional Office), use of the centre staff by WHO, support provided by centre staff for courses cosponsored or organized by WHO (HQ and/or Regional Office), WHO financial support to the centre through contractual or Technical Services Agreement or other type of support provided by WHO, any other collaborative activities. Please mention any difficulties encountered in the collaboration and suggestions for increased and improved collaboration with WHO.

3. Collaboration with other WHO Collaborating Centres:

Briefly describe the nature and outcome of the collaboration and the name(s) of the other WHO collaborating centre(s) with which the centre has collaborated. If applicable, please mention the name of the network of WHO CCs to which the centre belongs. Also include suggestions for increased and improved collaboration with other WHO CC

*WHO News: the Journal of the Japanese Nursing Association, Vol61, No. 11, p84, 2009.

WHO C. C. at St. Luke's College of Nursing worked with Mahidol University in Thailand, Siriraj Hospital, WHO C.C. for Research in Human Reproduction, Yonsei University (Korea), WHO C.C. for

Research and Training for Nursing Development in Primary Health Care, University of California at San Francisco (USA), WHO C.C. for Research & Clinical Training in Nursing , Columbia University (USA), WHO C.C. for Advanced Practice Nursing ,and University of Natal, University of South Africa, and Botswana University, WHO C.C. for Educating Nurses and Midwives in Community Problem-solving.

4. WHO News

Every two months, articles were submitted by center staffs to WHO news in the Journal of the Japanese Nursing Association.

Topics of 2009 were as follows:

Bangkok Platform for Action 'Healthy People for a Healthy World'

University of San Paulo, Leader of Global network of Nursing and Midwifery.

Establishment of the consortium for Global Health Nursing in Japan.

September Issue:

People-Centered Health Care

Healthy Urbanization