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Japan Academy of Community Health Nursing (JACHN)

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NEWS FROM JACHN

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THE 6th RESEARCH CONFERENCE OF JACHN

The Health Promotion Act, which was recently enacted in August 2002, gave legal support and solid foundation to the national health campaign called 'Healthy Japan 21.' This law is a milestone for promoting health and preventing disease, for it emphasized prevention of chronic diseases caused by unhealthy lifestyles as well as stress causing mental ailments, both of which are believed to be major threats in the health of Japanese people. Furthermore, the law contributed to promoting the health status of individuals in every physical development level and in every mental health level in the community. These events have brought higher expectations and greater demands to the nursing profession.

The JACHN, which is composed of societies and organizations of nurses who perform various nursing responsibilities in municipalities, health centers, home care, and school and occupational health nursing, is in the forefront of all these changes. In order to be fully armed for their evolving roles, the JACHN will convene the 6th Research Conference with the main theme 'Health Promotion Support and Community Health Nursing throughout the Life-span.' All members are cordially invited to attend the conference and to take such an opportune time to build and strengthen positive partnership among members of the four fields in community health nursing.

I am looking forward to seeing all of you in Yokohama.

(Keiko Kono: Tokai University)



Keiko Kono, professor of Community Health Nursing School of Health Sciences at Tokai University, is a chairperson of the 6th Research Conference of the Japan Academy of Community Health Nursing in 2003. She is an expert in occupational health nursing and an active board member of many academic societies, such as Japan Society for Occupational Health and Scientific Committee: Occupational Health Nursing (SCOHN) in International Commission on Occupational Health (ICOH).

Time: Saturday, June 7 and Sunday, June 8 in 2003

Place: Conference Room at Pacifico Yokohama

Minato-mirai, Nishi-ku, Yokohama-city, Japan

Main Theme: Health Promotion Support and Community Health Nursing throughout Life-span

All people interested in CHN as well as all JACHN members are welcome to attend. Please come and take this opportunity to share with everyone your opinions and experiences. Membership application leaflets will be available.

For further information, contact this e-mail address : chiiki@is.icc.u-tokai.ac.jp

TREND OF RESEARCHES PRESENTED IN JACHN

Five hundred and thirty nine (539) researches have been presented in the JACHN research conferences since its establishment in 1997. The outcome of analyzing the themes of the papers as well as the institutes to where the researchers belong may lead us to better understand the present and future activities of JACHN.

Institutes to which the researchers belong

There are two types of institutes in the field of community health nursing; the educational institute and the nursing practice institute. The educational institute includes university, college, junior college, special vocational school, research institute and others which are affiliated in education and teaching; while the nursing practice institute comprises local health center, municipality, school health administration, industrial sector, visiting nurse station, hospital and others involving in direct nursing care.

There are three existing research groups in the academy. The educational institutes have produced 402(74.6%) out of 539 papers submitted to JACHN from 1998 to 2002. The joint educational and nursing practice research group was able to develop 114(21.1 %) research papers. And the research group composed of the nursing practice institutes was able to submit 23(4.3%) researches. The majority of researches coming from the educational institute reflect the composition of the JACHN members.

| Institutes presenters belong to | Number and percentage | | | | | |
|--|-----------------------|---------------|---------------|---------------|----------------|----------------|
| | 1998 | 1999 | 2000 | 2001 | 2002 | Total |
| Educational institutes | 61 (72.6%) | 72 (63.7%) | 79 (80.6%) | 82 (75.2%) | 108 (80.0%) | 402 (74.6%) |
| Joint research of educational institutes and nursing practice institutes | 15 (17.9%) | 36 (31.9%) | 15 (15.3%) | 25 (22.9%) | 23 (17.0%) | 114 (21.1%) |
| Nursing practice institutes | 8 (9.5%) | 5 (4.4%) | 4 (4.1%) | 2 (1.8%) | 4 (3.0%) | 23 (4.3%) |
| Total | 84 (100%) | 113 (100%) | 98 (100%) | 109 (100%) | 135 (100%) | 539 (100%) |

Research areas

Research areas can be divided into three categories: research on life and health, research on nursing professionals and research on education of community health nursing.

| Fields of research | Number and percentage |
|---|-----------------------|
| Research on life and health | 302(56.0%) |
| Life and health of in-home patients | 142(26.3%) |
| Life and health of elders and people in the community | 104(19.3%) |
| Life and health of infants, students and industrial workers | 51(9.5%) |
| Life and health of foreigners | 5(0.9%) |
| Research on nursing professionals | 135(25.0%) |
| Community health nurses in public sector | 73(13.5%) |
| Organizing home care system | 49(9.1%) |
| Role of industrial nursing | 13(2.4%) |
| Research on education of community health nursing | 93(17.3%) |
| Others | 9(1.7%) |

Fifty-six percent (56.0%) of the researches studied people's life and health condition. Nearly half of the researches were about elderly in-home patients, their care needs and caregivers' needs. The second largest number of research themes was about health check-up survey of independent elders who are socially active, and of people younger than 65 in the community. The researches about children, students and industrial workers were about 9.5%. Twenty-five percent (25.0%) was about nursing professionals and their activities. Many researches are being made about activities and professionalism of local health center. Researches on organizing in-home care system have been getting more in number since 2000 since Long-Term Care Insurance (LTCI) act was enacted. Since then, we have had 15 papers presented every year, many of which are dealing with its supporting system. Seventeen percent (17.3%) of researches were on education of community health nursing.

Summary

The committee saw the great difference in the number of researches conducted by the nursing practice institute compared to the educational institute. To answer this concern, the committee is bound to work intensively in promoting joint researches of educational institutes and nursing practice institutes. This will be further discussed through an open workshop during the JACHN conference.

(MichikoKonishi: Hiroshima University, Asako Hirayama: Gifu College of Nursing)

THE LONG-TERM CARE INSURANCE (LTCI) ACT AND NURSES' ROLES

In Japan Long-term Care Insurance (LTCI) Act was established in 1997 and started in 2000.

The Insured and Beneficiaries:

The beneficiaries aged 65 years or over categorized in group 1, and those between 40 and 64 years old in group 2. Group 2 includes specific age-related diseases. Eligibility for benefits of the long-term care insurance is certified under municipal authorities. Trained health care or welfare professionals visit the applicant's home, care institution or hospital for assessment. The results are automatically calculated by the computer and this primary computer assessment is reviewed by a committee of experts. The committee of five professionals coming from a group of physician, nurses, social workers, physiological therapists (PT), occupational therapists (OT), home helpers and others will deliberate the final results of the client's status. The amount to be covered by the LTCI will be based on the level of care needed by the client. There are 6 levels.

Care Level Criteria and Limitation of Amount Covered by LTCI

| Care Levels | Time of care required | US\$ / M |
|------------------|-----------------------------------|----------|
| Support required | More than 25 min to 30 minutes. | 530 |
| Care level 1 | More than 30 min to 65 minutes. | 1,407 |
| Care level 2 | More than 65 min to 100 minutes. | 1,738 |
| Care level 3 | More than 100 min to 135 minutes. | 2,268 |
| Care level 4 | More than 135 min to 170 minutes. | 2,591 |
| Care level 5 | More than 170 minutes. | 3,046 |

2. Kinds of Services in Home Care Covered by LTCI are as followings:

Home help, bathing, nursing, rehabilitation, day care, medical care by physician or dentists, day service, short stay at care facility, short stay, group home, fee-charging home, welfare equipment, modifying or repairing house.

3. Utilization of LTCI and Medical Insurance in Home Care:

Two insurances are available for home care services. Those who need long-term care use the LTCI, and those who only need medical treatment use the medical insurance. Some people need both insurances. People aged 40 and over are eligible for the LTCI, whereas all the people from age zero can be eligible for the medical insurance.

4. Home Care Nurses' Roles:

Many nurses in home care provide nursing care, and a part of them are care managers and administrators of visiting nurse station. Home care nurses are conducting daily life care, medical treatment care, education and coordination for the clients to keep their healthy lifestyle. They are making every effort to heighten care quality and the users' satisfaction. There are 5,200 visiting nurse stations in Japan, where many nurses are working hard. In recent years, their work and field of activities have been expanding, now they also perform managerial and leadership role in the field of social welfare.

(Setsu Shimanouchi: Tokyo Medical and Dental University)

THE 2ND INTERNATIONAL SEMINAR THE JAPAN ACADEMY OF COMMUNITY HEALTH NURSING

Theme: The Present Situation of Community Health Nursing and Evaluation Method in the United Kingdom
— Construction and Process of the Home Care Evaluation System in National Health Service (NHS) —
Recently, the word "EBN (Evidence Based Nursing)" became a buzz-word among the people as well as in our academic society. Evaluation of the quality of care has become more important than ever. This seminar will offer you an opportunity to review the evaluation system in Japan through Dr. Gerrish's reports about the system in the United Kingdom.

Speaker: Professor Kate Gerrish, R.N., Ph.D. (University of Sheffield, UK)

Date : 9:00 – 11:30 Saturday, June 7, 2003

Place : Pacifico Yokohama, Conference Center
(Akiko Sasaki: Saitama Prefectural University, Kumiko Morita: Tokyo Medical and Dental University)

HEALTHY JAPAN 21 AND NURSES' ROLES

The ten-year national campaign for health promotion was initiated in Japan in the year 2000 under the leadership of the Ministry of Health, Labour and Welfare. The campaign is called 'Healthy Japan 21.' The main purpose of the campaign is 'to encourage people to realize healthy lifestyle of their own choice in a society in which each individual is allowed to live an active and positive life for the purpose of preventing early deaths and improving quality of life; also 'to advocate nation-wide health campaign, integrating these individual efforts into each social function of public health departments.' The characteristics of the campaign include: improving quality of life rather than merely prolonging life-span, expanding vision for life-long health plan, introducing business management and developing health-conscious environment.

In order to promote social awareness for health, nine specific health problems are listed to call for people's attention in the campaign. They are: 1) food and nutrition, 2) physical exercise, 3) relaxation and mental health, 4) tobacco use, 5) alcohol use, 6) dental care, 7) diabetes, 8) circulatory disease and 9) cancer.

The specific plans of the campaign are: 1) dissemination of the campaign by using various methods and media, 2) efficient operation of health insurance plans by joint projects, 3) establishment of support system for municipalities and other sectors to develop health promotion projects, and 4) development of the campaign promotion network, and others.

In November 2001, a new bill was discussed by the Liberal Democratic Party members in the governmental panel for improvement of medical system. Through the discussion, the importance of 'developing social infrastructure and legal system for health promotion and disease prevention in response to people's expanded longevity and their quality of life' was emphasized. In March 2002, consequently, the bill for health promotion was submitted to the 154 session of the National Diet. It passed in the House of Representatives in June and in the House of Councilors in July, and then officially enacted as Health Promotion Act in August 2002. The campaign 'Healthy Japan 21' was deemed as an essential part of the law.

Public Health Nurses (PHNs) are positively involved in health promotion activities of the municipalities in cooperation with the community leaders, groups and residents. Activities of PHNs include development, implementation and evaluation of community health projects in partnership of the whole community. The level of involvement of PHNs may be different depending on each municipality. Their priority is to design and coordinate a feasible action plan and implement it according to the guidelines of community health nursing. It is sometimes not easy to make the residents acknowledge the importance of the concept of 'health promotion.' PHNs also have the responsibility to evaluate the process and outcome of health projects through activities of an evaluation committee.

(Sachiyo Murashima: The University of Tokyo)

**The Third International Conference of Community Health Nursing Research
will be held in Japan, 2005.**

**Further detail with regards to the date, venue and theme at the affair
will be announced at a later date.**

**The Board of Japan Academy of Community Health Nursing
expects your ardent participation.**

**Colleagues coming from foreign countries
who want to participate and present their papers
are most welcome.**

**Secretariat of Japan Academy of Community Health Nursing:
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