

問題 1. 以下の (1) ~ (2) について解答欄に記述してください。

Background: There is little research examining resistance, refusal or rejection of care by people living with dementia within acute hospital wards despite the prevalence of dementia in adult hospital populations.

Objectives: To explore the ways in which resistance to care manifests within the acute setting and is understood, classified and subsequently managed by ward staff.

Design: Ethnography Setting: Acute medical units and trauma and orthopedic wards in five NHS hospitals in England and Wales.

Participants: People living with dementia and nursing team members (registered nurses and healthcare assistants) on participating wards.

Methods: Observational fieldwork and ethnographic interviews collected over a period of 20 months (155 days of non-participant observation (minimum 2 h, maximum 12 h, total hours: 680) focusing on staff delivering care to patients with dementia. Interviewees included patients, visitors, and staff working on and visiting the ward. Data collection and analysis drew on the theoretical sampling and constant comparison techniques of grounded theory.

Results: We found that resistance to care by people living with dementia was a routine and expected part of everyday care in the participating acute hospital settings. The timetabled rounds of the ward (mealtimes, medication rounds, planned personal care) significantly shaped patient and staff experiences and behaviors. These routinized ward cultures typically triggered further patient resistance to bedside care. Institutional timetables, and the high value placed on achieving efficiency and reducing perceived risks to patients, dictated staff priorities, ensuring a focus on the delivery of essential everyday planned care over individual patient need or mood in that moment. Staff were thus trapped into delivering routines of care that triggered patterns of resistance. (a)

Conclusions: Nursing staff struggle to respond to the needs of people living with dementia in acute care settings where the institutional drivers of routines, efficiency and risk reduction are not mediated by clinical leadership within the ward. Cycles of resistance in response to organizationally mandated timetables of care can result in poor care experiences for patients, and emotional and physical burnout for staff. More research is needed into how institutional goals can be better aligned to recognise the needs of a key hospital population: people living with dementia. (b)

Katie Featherstone, et al.: Routines of resistance: An ethnography of the care of people living with dementia in acute hospital wards and its consequences. International Journal of Nursing Studies 96, 53-60, 2019.より抜粋

(1) 下線部 (a) と (b) を和訳してください。(各 15 点 合計 30 点)

(a)

(b)

(2) 本文の内容を踏まえ、急性期病棟における認知症を持つ人々へのケアについて自分の意見を日本語で述べてください。(30 点)

問題2. あなたの看護実践に関する下記の質問に対し、英語（文章）で回答してください。
（合計 40 点）

(1) あなたはどのような部署で働いていますか（5 点）

(2) あなたの看護職としての経験年数はどのくらいですか（5 点）

(3) あなたの看護職としての経験の中で印象に残っている事例（15 点）

(4) 大学院で研究したいテーマ（15 点）