Panel Discussion 4

Learning from the Approaches in Japan

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Site Visit to Shinagawa City

Demographic facts and Mayor’s initiative

Life skill development for senior men

Job placement service

Human resource development
Silver Plaza Umewaka

Exercise for care prevention

Cultural and brain refreshing activity

User-friendly equipment with reasonable cost
Social welfare organization “Camellia”

- President’s vision for elderly care
- Open to the community
- Young but disciplined care workers
- Support from the city and the community
- Covered by long-term care insurance
- Day care
- Long waiting list
- High technology
- Dementia
Shinagawa’s three systems for supporting the elderly

65 and over 70,800 (2010)

- **Healthy 55,500**
  - Able to be independent
  - Active elderly

- **Slightly weak 3,500**
  - Need some support
  - Supported elderly

- **Support level 1, 2 3,700**
  - Need care service at home
  - Elderly requiring care services

- **Care level 1 to 5 4,000**
  - Institutionalized 4,100

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**Social participation program**
- Working
- Volunteer
- Health promotion
- Learning

**Supporting network**
- Neighborhood support
- Meal
- Safety check
- Preventive care

**Long-term home care system**
- Care management
- Visiting Care
- Short stay
- Day service

**Mutual support in the community**
- Various private and public care providers
- Various private and public service providers

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**5th Shinagawa LTC Plan (2010)**
Integrated community care system

**Healthcare**
- Commuting to medical facilities/care facilities

**Long-term care**
- Home-visit care
  - Nursing care
- Old people’s club, residents’ association, long-term care prevention, living support, etc.

**Housing**
- Own home/elderly housing with long-term care

**Living support**
- Provides consultation and coordinating services

**Prevention**
- Integrated community care support center/care manager
Local governments (e.g. Shinagawa City) support elderly’s living including their employment, and encourage preventive care and disease prevention.
Integrated community care system

Healthcare

• Provides consultation and coordinating services

Long-term care

• Nursing care

Living support

• Own home/elderly housing with long-term care

Prevention

• Integrated community care support center/care manager

Housing

• Commuting to medical facilities/care facilities

Local governments or related organizations (e.g. Silver Plaza Umewaka, Tokyo Metropolis Health and Welfare Foundation) give professional advices to support elderly’s choice of appropriate equipment for safe and active life.

Rental service of welfare equipment (such as wheelchairs and special beds) is covered by Long-Term Care Insurance.
Integrated community care system

In-home services:
- Outpatient day long-term care
- Multifunctional long-term care in a small group home
- Short-term admission for daily life long-term care
- Combined service
  (Multifunctional long-term care in a small group home + Home-visit nursing), etc.

Long-term care

- Facility/housing-type services
  - Facility covered by public aid providing long-term care to the elderly
  - Long-term care health facility
  - Communal daily long-term care for a dementia patient
  - Daily long-term care admitted to a specified facility

Commuting to medical facilities/care facilities

Own home/elderly housing with long-term care

"Camellia" provides various care services cooperated with local governments. Various care professionals including care managers and certified care workers are closely committed in these services.

※ A community assumed in the integrated community care is a junior high school district where necessary services can be accessed within about 30 minutes.
## Type of Facility Services

<table>
<thead>
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<th></th>
<th>RYOYO</th>
<th>ROKEN</th>
<th>TOKUYO</th>
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<tbody>
<tr>
<td></td>
<td>(Medical Long-Term Care hospital)</td>
<td>(Health services facility for the aged)</td>
<td>(Special nursing home for the aged)</td>
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<tr>
<td>Number of beds</td>
<td>340,000</td>
<td>310,000</td>
<td>490,000</td>
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<td>(approximately)</td>
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<tr>
<td>Number of facilities</td>
<td>5,305</td>
<td>3,533</td>
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<td>Floor space per person</td>
<td>&gt;6.4㎡</td>
<td>&gt;8.0㎡</td>
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<td>Minimum requirements of human resources per 100 patients</td>
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<tr>
<td>Doctors</td>
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<tr>
<td>Nurses</td>
<td>18</td>
<td>10</td>
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<td>Care Worker</td>
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<td>24</td>
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Source: Ministry of Health, Labour and Welfare
Human resource: Role of Care Manager

**What is Care Manager?**

1. **Functions**
   ① Consulting
   ② Coordination of municipality, service providers and/or nursing homes for appropriate care services

2. **Qualification**
   ① Over 5 years working experience as licensed medical/welfare/health professional
   ② Passing Care Manager Exam.
   ③ Completion of the Care Manager Training Course

**Care manager for home care services**

1. **Task**
   Making care coordination plans for home care
   Coordination of service providers

2. **Location**
   Care manager’s Office, Integrated Community Care Support Center

**Care manager for facility care services**

1. **Task**
   Making facility care plans

2. **Mandated Facilities**
   Various kinds of Nursing homes and Group homes
### The Use of Long-term Care Services

**Users**
- Municipal governments (sections in charge)
- Visit survey
- Doctor's written opinion

**Care/support need certification**
- Bedridden or demented persons who need long-term care
- Persons who need support in the daily life as they are likely to be in the condition requiring long-term care
- Those likely to come to need long-term care/support in the future

**Care levels 1-5**
- Facility services
  - Intensive care home for the elderly
  - Long-term care health facility
  - Sanatorium medical facility for the elderly requiring long-term care

**Support levels 1 & 2**
- In-home services
  - Home-visit long-term care
  - Home-visit nursing
  - Outpatient day long-term care
  - Short-stay admission service, etc.
- Community-based services
  - Multifunctional long-term care in small group homes
  - Home-visit at night for long-term care
  - Communal daily long-term care for dementia patients (group homes), etc.

**Care plan for the use of long-term care**

**Care plan for preventive long-term care**
- Preventive long-term care services
  - Outpatient preventive long-term care
  - Outpatient rehabilitation preventive long-term care
  - Home-visit service for preventive long-term care, etc.
- Community-based services for preventive long-term care
  - Multifunctional preventive long-term care in small group homes
  - Preventive long-term care for dementia patients in communal living, etc.

**Long-term care benefits**
- Services which cope with the actual municipalities’ needs (services not covered by the long-term care insurance)

**Preventive long-term care benefits**
- Community support projects

**Not certified**
Japan’s approaches

• **Financial system**: Long-term care insurance
• **Standardization**: Classification of client’s care-need level by national standard
• **Optimization**: Various options both in-home and facility care to suit client’s needs and situation
• **Coordination**: Integrated community care support center/Care manager
• **Prevention**: Care prevention to the healthier elderly, Work opportunities and social participation
• **Localization**: Creative ingenuity by local governments and private sectors
• **Human resources**: Senior volunteers, Various care professionals incl. care managers and certified care workers
What did you find through the study tour?
Some additional information
Health Transition (Causes of death 1899—1998)

- Cancer
- Heart Dis.
- Stroke
- Lung Tb
- Other Infectious Dis.
- Others
- Senility
- Unknown

Life-style Related Dis.

Year
Crude death rate by cause of death in Japan (1955-2006)
Age-adjusted death rate by cause of death in Japan (1955-2006)
Aging and cancer in Japan

• 87%(M), 94%(F) live until age 65
  72%(M), 87%(F) live until age 75
  22%(M), 46%(F) live until age 90
• 50% of the Japanese have at least one cancer during their lifetime.
• 30% of the Japanese die from cancer.
• Many people are cancer survivors and/or living with cancer.
As people are getting older, concept of health changes.

- 無病（No disease）息災（Living healthily）
- 一病（One disease）息災（But living healthily）
- 多病（Many diseases）息災（Still living healthily）

Quality of Life (QOL) is crucial.
Gaps between Life Expectancy and Health Expectancy (2010)

- **Male**
  - Life Expectancy (LE): 70.42 years
  - Health Expectancy (HE): 73.62 years
  - Gap: 12.68 years
  - LE and HE are marked with blue and red bars respectively.

- **Female**
  - Life Expectancy (LE): 79.55 years
  - Health Expectancy (HE): 86.30 years
  - Gap: 6.75 years
  - LE and HE are marked with blue and red bars respectively.

(資料：平均寿命（平成22年）は、厚生労働省「平成22年完全生命表」
健康寿命（平成22年）は、厚生労働科学研究費補助金「健康寿命における
将来予測と生活習慣病対策の費用対効果に関する研究」)
An old Japanese wisteria still shows its beautiful blossom to us.