

## Outline of Survey

### 1 Survey of Medical Institutions

#### (1) Objective

This survey is to clarify the current status of distribution and preparedness of medical care institutions (hospitals and clinics as defined by the Medical Care Act (Act No. 205 of 1948) in Japan, to understand their clinical functions, and to obtain basic data for health care policy making.

#### (2) History

This survey started in 1948 as the “Health Care Survey from the Institution Viewpoint,” and has been conducted under the name of “Survey of Medical Institutions” since 1953.

The survey today has two parts. The Dynamic Survey of Medical Institutions (hereafter, Dynamic Survey) has been conducted every month since 1973 based on applications and notifications of establishment/closure from medical care institutions. And the Static Survey of Medical Institutions (hereafter, Static Survey) has been taken every three years since 1975 to find out the current status of medical care institutions in detail.

The Static Survey was conducted as of December 31 until 1981. Since 1984, it has been conducted as of October 1.

#### (3) Type, period, and dates of the survey

Static Survey (Every three years): As of October 1, 2017

Dynamic Survey (Every month): From October 1, 2016 to September 30, 2017

#### (4) Subjects of the survey

Static Survey: All medical care institutions in Japan that are in practice at the time of survey

Dynamic Survey: Medical care institutions that have been established, closed, etc.

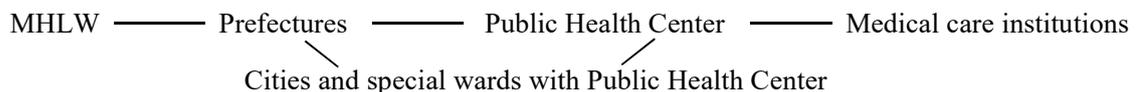
※ Medical care institutions include clinics that specialize in home-visiting care but exclude maternity homes, healthcare facilities for the elderly requiring long-term care, and Public Health Centers.

#### (5) Items surveyed

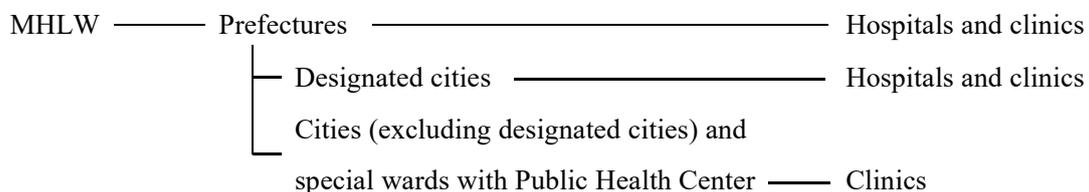
Name and address of the medical care institution, establishing organization, clinical specialties, machinery and equipment, number of health professionals and their working conditions, number of beds permitted, social insurance medical practice, emergency care systems, medical practice and exams, and other related items

#### (6) Method and route of the survey

In the Static Survey, managers of medical care institutions filled in questionnaire themselves.



In the Dynamic Survey, Governors or Mayors of the cities and special wards that have Public Health Center filled out the questionnaire based on the application and notification of establishment, closure, etc. from medical care institutions, and reported to the Minister of Health, Labour and Welfare.



**(7) Tabulation of the results**

Director-General for Statistics and Information Policy (in charge of statistics/information policies and policy assessment) at MHLW tabulated the results.

\* Survey of Medical Institutions is statistical research used to create “Medical Institutions Statistics,” fundamental statistics in accordance with the Statistics Act.

**2 Hospital Report**

**(1) Objective**

This report is to understand the state of use by patients of the country’s hospitals and medical clinics with beds for long-term care, and to acquire basic data for health care policy making.

**(2) History**

This report started in October 1945 as the “Weekly Hospital Report”. In June 1948, frequency of the report was changed from a weekly basis to a monthly basis. Furthermore, the Ordinance for Enforcement of Medical Care Act (Ministerial Ordinance No.50 of 1948 by Ministry of Health and Welfare) was established to clarify the basis of the report in November 1948. Thereafter, the report was conducted in accordance with the Medical Care Act.

On revision of the Ordinance for Enforcement of Medical Care Act in 1954, the report was renamed as “Hospital Report.” Since 1998, medical clinics with long-term care type beds group (current “Beds for long-term care”) have also been requested to submit the report.

Additionally, the basis of the report has become the Enforcement Order of the Medical Care Act (Cabinet Order No. 326, 1948) since March 2001. In 2006, the report on beds for long-term nursing care was added.

**(3) Period of the report**

From January 1, 2017 to December 31, 2017(Monthly):

**(4) Subjects of the report**

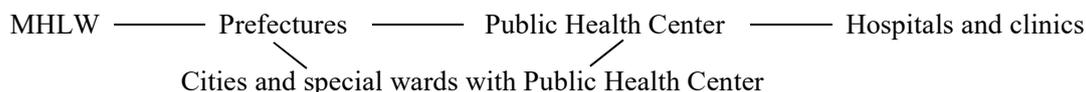
Hospitals and medical clinics with beds for long-term care in Japan

**(5) Items surveyed**

Numbers of existing inpatients, newly admitted patients, discharged patients, and outpatients

**(6) Method and route of the report**

Managers of hospitals or medical clinics with beds for long-term care answered the questionnaire and reported to the Minister of Health, Labour and Welfare



**(7) Tabulation of the results**

Director-General for Statistics and Information Policy (in charge of statistics/information policies and policy assessment) at MHLW tabulated the results.

### 3 Notes

#### (1) Symbols used in the tables

Quantity zero	—
Data not available or applicable	...
Item/Category not applicable	•
Percentage, etc. insignificant (less than 0.05%)	0.0
Decreased number or percentage	△

- (2) Values presented are rounded and the sums of the items do not always make up the totals.
- (3) Calculation of values per 100,000 population used total population data from the “Population Estimates (as of October 1, 2017)” developed by Statistics Bureau, Ministry of Internal Affairs and Communications, except for designated cities, special wards, and core cities for which the calculation used total population as of October 1, 2017 estimated respectively by designated cities, Tokyo Metropolis, and core cities.
- (4) Simple year-over-year comparison of the number of professionals at hospitals between 2016 and 2017 is invalid as the data was collected until 2016 by “Hospital Report” and from 2017 by “Static Survey of Medical Institutions,” which reports that the number of professionals was unknown in around 1.4% of hospitals (these hospitals are made up of those with numbers of professionals unknown for all types of professions and those with numbers of nurses and assistant nurses unknown among types of professionals that are supposed to be assigned according to the personnel allocation standard.)

The reference table (page 65) is included for valid comparison under the same conditions which were created by excluding, from the result of the 2016 Hospital Report, hospitals with the number of professionals unknown in the 2017 Static Survey of Medical Institutions (or excluding numbers of nurses and assistant nurses in case of hospitals with numbers of nurses and assistant nurses unknown in the 2017 Survey).