Providing Information on Medical Functions

Overview
Creation of a System to Provide Information on Medical Functions

Enforced April 1, 2007

Create a system to obligate medical institutions to report definite information on medical functions to prefectures. Prefectures collect such information and provide it to people in understandable way. (Similar system is created for pharmacies)

[How patients obtain information]
Such As:
- Announcement on internet, etc.
- Voluntary information provided by medical institutions
- Notification to patients in medical institutions

[Points of the Revision]
- Provide required information uniformly
- Centralize information
- Provide objective information in understandable manner
- Improvement of guidance/consultation functions

[Example of "definite information"]
- Matters regarding management, operation, and services (specialized treatment, date/time of treatment, number of beds, ability to cope with foreign language, etc.)
- Matters regarding services and medical cooperation system (specialists [limited to those that are advertisable]), facilities, types of diseases and treatments that can be handled, availability of in-home medical care, availability of second opinion, regional medical cooperation system, etc.)
- Matters regarding achievements and results of medical care (medical safety measures, measures against hospital infection, implementation of critical paths, treatment information management system, information disclosure system, availability of analysis on results of treatment, number of patients, average length of hospitalization, etc.)

Outcome guidelines on treatment result information including the rate of deaths will be added in the future one by one as objective evaluation becomes possible including how to disclose such data properly.

Provide explanation by documents at the time hospitalization (the Medical Care Law) (revised in FY 2006)

Legally establish in the Medical Care Law that managers of hospitals and clinics formulate, issue, and explain treatment plans at the beginning/end of hospitalization.

[Overview of revised system]

Obligation to provide treatment plans at the beginning of hospitalization
- Managers of medical institutions are obligated to prepare, issue, and appropriately explain treatment plans describing treatments to be provided to patients during hospitalization.
- In doing so, managers are obligated to make efforts to reflect knowledge of medical professionals of hospitals/clinics and facilitate organized cooperation with them.

(items to be described in the treatment plan)
- Name, date of birth, and sex of the patient
- Name of a doctor or dentist who is in charge of providing treatment to the patient
- Specify disease or injury that caused hospitalization and main symptoms
- Plans for examinations, surgeries, medications, and other treatments to be provided during hospitalization
- Other items designated by the Ordinance of the Ministry of Health, Labour and Welfare

Obligation to make efforts to provide recuperation plans at the end of hospitalization
- Managers of medical institutions are obligated to make efforts to prepare, issue, and appropriately explain recuperation plans describing matters regarding required health care, medical care, and welfare services after hospitalization.
- In doing so, managers are obligated to make efforts to cooperate with health care, medical care, and welfare service providers.

[Effects]
- Improvement of information provided to patients
- Improved informed consent
- Promotion of team medical care
- Enhanced cooperation with other medical institutions (displaying so-called adjustment function for leaving hospital), and
- Promotion of evidence-based medicine (EBM), etc.
Expand Matters that can be Advertised through Revision of Advertisement Regulations (the Medical Care Law)

- With regards to regulation of advertisable matters under advertisement regulation system, the system has been revised in such a way that items with certain characteristics are grouped and regulated comprehensively as "matters regarding ..." instead of listing individual matters one by one as conventionally done.
- Substantial relaxation of advertisement regulation
- Revision from direct penalties to indirect penalties in case of matters that are not advertisable are advertised

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<th>Revised System</th>
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<td>Advertisable matters</td>
<td>Listing individual matters one by one (Example)</td>
<td>Matters regarding items with certain characteristics are regulated. (Examples)</td>
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<td>• Number of beds, number of rooms</td>
<td>• Matters regarding facilities, equipments, and employees</td>
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<td>• Matters regarding functional training rooms</td>
<td>• Matters regarding contents of medical care to be provided</td>
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<td>• Whether or not medical records are stored in electronic format</td>
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<td>• Number of employees, deployment rate to the number of patients, etc.</td>
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<td>False advertisement</td>
<td>Penalties are imposed directly</td>
<td>Penalties are imposed directly</td>
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[Example of relaxed advertisements]

- Specialties of medical professionals,
- Photographs and visual images of facilities and medical professionals,
- Treatment policies,
- General name/development code of investigational drugs,
- Notification of provided treatments and contents of treatments in understandable manner,
- Matters regarding medical devices, etc.

(These information, however, must be in accordance with laws, regulations, and guidelines)

* Imprisonment with work for a term not exceeding 6 months or a fine not exceeding ¥300,000.