Section 3 Internal Reform Efforts

The Section 1 and Section 2, as instances of inadequate operations / neglect of improvement providing the pension record issues and drug-induced hepatitis cases, explained points to reflect as Ministry of Health, Labour and Welfare and current efforts to have being promoted. These responses to each issue are important but more drastic improvement is to establish change the culture of Ministry of Health, Labour and Welfare itself and to improve the structures for citizen-oriented service. In this section, as reforms toward future service proceedings the progress situations of human resource system reforms, cost reduction / elimination of wastes, review of relevant public interest organizations etc. as well as new approaches for structural efforts in system improvement are hereby introduced.

1 Human Resource System Reform

With regard to evaluation of national public officers, considerations were advanced as a whole government, and attempted evaluation was carried out, but due to revision of the National Public Service Act in 2007 it is officially prescribed that the evaluation of officers shall be made in dual element, performance of his/her duties "performance assessment", and another for his / her achievement "achievement assessment", every office and ministry conducts performance assessment once a year and achievement assessment*1 twice a year from October, 2009.

At the first step to change administration culture criticized by public, the Ministry of Health, Labour and Welfare also decided to adopt original criteria in conjunction with implementing this new personnel evaluation system. In particular, on the basis of three points of view "cost consciousness / elimination of wastefulness", "system reform", "information collection / disclosure", all officers with a rank lower than administrative vice-minister set up concrete goals individually according to each work position, and in achievement assessment degree of achievement of the individual goals are to be assessed.

As for "cost consciousness / elimination of wastes" is set to abandon "wastes" so-called "unnecessary indirect costs" (spending a great amount of indirect expenses that is to say high labor cost or inefficient administrative expenditures etc. before effects reaching to citizens who have got to be final beneficiaries), which is a necessary viewpoint to make the people's burden directly connect with benefits or services. Supervisors of each bureau set up the targets for instance:

- "In response to XXX system review, XX subsidy and the Grants for X etc. that are with low utilization ratio is to be considered including improvement or discontinuing to present the result in numerical terms."
- "to strive to reduce cost / streamline as total cost of administrative work and projects, targeted at reduction of approx. XXXXX yen compared to last fiscal year in this organization (authority / department / division / office)."

The "system reform" is an essential view point to strive to pursue improvement continuously, which prevents the system once built from being left. For instance, in scheme planning, possible influences in conjunction of introduction of a new XXX scheme can be predicted in detail and the predicted results can be reflected in the scheme in advance so to avoid confusion at the time of introduction.

*1 For "performance assessment", the direct supervisor of individual officers appraises his / her job behavior in his / her duties based on the prescribed evaluation categories once a year. For "achievement assessment", individual officers set his / her job-related goal to achieve (by when? / What? / Which degree?) at the beginning of every term (6months), and submit a self-report about achievement state etc. at the end of the term, and his / her direct supervisor appraises it. The results based on these two assessment elements shall be reflected in personnel evaluation and salaries of individuals.

In addition, from the view of that the thought of what is called 'after-sale service' in private sectors was lacking, for operations of the XX scheme there can be objectives to raise such as "inadequacy in the XX scheme is to be examined based on opinions from practical work staff and users, and to be corrected by the end of this term".

The "information collection / disclosure" is an essential viewpoint to grasp actual situations of the affairs relating to citizens' life / property and to transmit adequate information to the public. In this field, objectives such as "to carry out investigation voluntarily in the case of an affair connecting to citizens' life / property and to announce the investigated results promptly" can be raised.

These objectives shall be presented in numerical terms (quantified) as far as possible, and the new personnel evaluation standards are designed to create circumference where the evaluation within ministries be consistent to that of citizens' eye, and the officials who are well received by citizens further can contribute to implementation of citizen-oriented policies.

In addition, in January, 2010 under the direct control of the minister a project team for personnel evaluation consisting of outside experts was organized, and has promoted examination and improvement of the human resource assessment done in October, 2009 as well as discussion about the modality of personnel of Ministry of Health, Labour and Welfare, and will put the required improvement or such into practice sequentially.

On April 20, 2010 as part of "Reform of Ministry of Health, Labour and Welfare" the goals of it as well as the bureaus concerned were publicized (the ministry's organizational goal posted in the end of "at the end" in the Section 1). Based on the goals by departments in line with the ministry's, the officials set up the individual goals, which are used for human resource assessment or such with the intentions of making efforts on organizational operations. The ministry's organizational goal shows the "Seven abilities we are missing" listing ① Comprehension of actual situations ② Cost consciousness / wastes reduction ③ Communication skills ④ Self-disclosure ⑤ Administrative system / service improvement (ideas of customer service) ⑥ Marketing and verification on policies ⑦ New policy planning ability, which are considered must-dos to enhanced our organizational force.

2 Cost Reduction / Elimination of Wastes

The most important thing to get public understandings about the burdens for social security is the citizens' feeling that the tax and premiums they paid are used for social security benefits efficiently without wasting. On this account, clarifying the connection of burdens and benefits efforts to eliminate unnecessary indirect costs and wastes are being made.

(1) Measures on FY 2010 Budget

1) Stay of execution of the FY 2009 first supplementary budget

The Diet passed the FY 2009 first supplementary budget on May 29, 2009 providing a total of 3417.1 billion yen for the jurisdiction of Ministry of Health, Labour and Welfare, but in the autumn of the same year the said budget was reviewed from the view points of needs of emergency as supplementary budgets, necessity level in economic measures and checking for wastes in budgets, resulting in stay of execution totaling 631.4 billion yen in October, 2009.

October 6, 2009

Instructions for Drawing Up the FY 2010 Budget of the Ministry of Health, Labour and Welfare

Akira Nagatsuma, Minister of Ministry of Health, Labour and Welfare

In drawing up the FY 2010 Budget of the Ministry of Health, Labour and Welfare, the existing budget should be thoroughly reviewed based on the followings.

Basic attitude

- ①The maximum effort should be exerted in cutting costs for the existing budget, including benefit expenses/nondiscretionary spending, through streamlining the system of benefit payment/administration.
- (2) The costs excluding benefit expenses and nondiscretionary spending should be reviewed with no area off-limits.

2. Policy for individual expenses

- ①Public work-related costs focusing on improvement of water supply facilities should be cut by 20%
- ②Improvement of facilities for the independent administrative organizations under the Ministry of Health, Labour and Welfare (including the external organs of MHLW) should be limited to the essential ones.
- ③The costs for the project paid by the government based on the contracts on outsourcing or procurement should be cut by 20% through reforming the method for bid and reviewing procurement.
- (4) The cost for various systems (development expenses, use expenses, leasing fees, etc.) should be reduced by 20%
- (§) The costs for management of the Ministry or Health, Labour and Welfare (including those of the external organs the Regional Bureaus) and the costs for operations by the personnel should be reduced through streamlining administration, etc.
- Subsidies to the public interest corporation and authorized corporations, etc., of which ex-government officials are member, should be cut by 20%.

 In particular, the subsidies for the corporations, where ex-government officials hold the positions of director general or directors for 5 times in a row, will be prohibited in principle.
- ②Other expenses concerning the budget of the Ministry of Health, Labour and Welfare, which were pointed out at the Diet or by the Board of Audit of Japan and other expenditures questioned by the nation should be reviewed, and the results should be properly reflected in the budget.
- ®Independent administrative organizations, public interest corporations, authorized corporation and designated corporations should be scrutinized whether they are making unnecessary expenses. In addition, the internal reserves that contradict the Cabinet decision should be eliminated by taking measures such as returning the excess to the national treasury.
- ®Review on the special account under the supervision of the Ministry of Health, Labour and Welfare should be implemented in the same manner.

2) Efforts to reduce FY 2010 budget

The policy of FY 2010 budget was approved in a Cabinet meeting in September, 2009, and it was stated that each minister shall strictly review the amount of budget requested as of the August same year from the zero-base.

Ministry of Health, Labour and Welfare reviewed the existing budget thorough based on the "Instruction on preparation of FY 2010 budget bill of Ministry of Health, Labour and Welfare" provided by the minister(October, 2009).

The said review was conducted in the basic stance of "① to the existing budget even for benefits / mandatory expenses, maximum energy shall be applied to reduce them by streamlining the benefit payment system / work implementation structure etc.", and "② other than benefit payment / mandatory expenses shall be reviewed without allowing a sanctuary." and along with the direction clarified for each expense such as "20% reduction of public works related centering on water utility" and "minimum facility maintenance for Ministry of Health, Labour and Welfare and independent administrative institutions concerned". As a result, due to subsidies reduction to corporations with

parachutists (independent administrative institutions and public interest corporations etc. wherein public officials retired into management-level / staff posts in), reduction in public works related expenses / facility maintenance cost and reduction of system fee etc., as of October, 2009 a total of 186.8 billion yen was reduced from the FY 2010 budgetary request of August, 2009. In addition, reduction in fiscal investment and loan by 58.4 billion yen and cash-out of assets of Ministry of Health, Labour and Welfare (housing of government workers etc.) were achieved.

3) Responses to "Budget Screening"

The "budget screening" in the Government Revitalization Unit held in November, 2009 concluded that requests for 51 projects relating to Ministry of Health, Labour and Welfare be discontinued / suspended or reduced. Based on this Ministry of Health, Labour and Welfare decided to execute measures such as return entire national treasury of the Welfare and Medical Service Agency, grants review for operating expenses of the Employment and Human Resources Development Organization of Japan and the Japan Organization for Employment of the Elderly and Person with Disabilities, which resulted in reduction of a total of 423.9 billion yen

Aside from this, an independent screening of own budgets were done with the aim of presenting our initiative efforts to reduce costs by reviewing subsidies for public interest corporations that contains retained ratio exceeding 30% etc, resulting in a reduction of approx. 20.8 billion yen.

Through the aforementioned approaches on cost reduction, the budget request in October 2009 was reduced by 1,333.3 billion yen for the projects within the jurisdiction of Ministry of Health, Labour and Welfare, and was reported at 27,556.1 billion yen as the FY 2010 budget submitted in March 24, 2010.

*2 The "budget screening" is to judge the necessity of each project / affair of administrative works through discussion adopting outside views in public. For the record on implementing budget screenings by the Government Revitalization Unit, refer to the website of the said unit: http://www.cao.go.jp/sasshin/index.html.

4) Overseeing / Streamlining the Budget Use

The "Reforms on budgeting" (cabinet approved on October 23, 2009) concluded that each governmental office and ministry shall establish a team including outside experts led by

vice minister to oversee / streamline budgets drawn up under the sovereignty of the people, by eliminating wasteful budget use such as using-up at the end of year.

For this reason, on February 26, 2010, Ministry of Health, Labour and Welfare formed the "team for overseeing / streaming budget of the Ministry of Health, Labour and Welfare" led by Nagahama vice-minister as a team leader. The said team is to formulate plans for budget use, to disclose information concerning progress management / self-evaluation and budget implementation, and to carry out preliminary review of critical decisions on budget use*3 and the first meeting of the said team was held on March 30, 2010 wherein the plans for FY 2010 budget implementation was decided.

The administrative projects review implemented by individual governmental office or ministries under the instruction of the Government Revitalization Unit has been promoted by the team for overseeing / streaming budgets as a core, and on the three days of May 31, June 7 and 10, 2010 review of projects were reviewed in the open in conjunction with outside experts (implementation of publishing process). Necessary review will be continuously attempted with review of own projects.

5) Prevention of Fraudulent Subsidy

Within subsidies as to public offering one, in response to an executive official of a social welfare corporation being arrested and indicted with fraudulently gaining of subsidies to diverse to a different project, the "study council for prevention of inadequate use of subsidy" was held, and it complied the preventative measures such as enhancement of transparency and follow-up checking structure for deciding processes on December 24, 2009

(2) Administrative Costs Reduction

1) Examination prior to procurement by the public procurement committee

With regard to public procurement, the "Instruction on preparation of FY 2010 budget bill of Ministry of Health, Labour and Welfare" (October, 2009) concluded that the cost the nation pays out pursuant to the contracts for work entrustment or product procurement etc. shall be reduced 20% for instance by reform of bidding processes and review of procurement methods, and in response to this the "public procurement committee of Ministry of Health, Labour and Welfare" was held and it conducted preliminary review on the expenses exceeding a certain cost to take procurement procedures after January 1, 2010. The public procurement committee reviews the availability of cutback by lump-sum purchases, the reasonability of quantity to procure, any triggers for hindering fair competition, and any possibilities of a higher competitive contract etc. and shall correct

them if any problem is found.

2) Efforts in administrative cost reduction

To eliminate the "wastes" or so-called "unnecessary indirect costs", an autonomous posture of striving to begin at the matters near at hand is important and it is necessary to make continuous efforts in administrative costs such as expenses for consumable items, facilities and utilities. Taking these steady efforts will be a step to assure public trust. For this reason, the minister of Health have been making himself efforts to reduce administrative costs by issuing instructions as to thorough copies of both sides of paper, lump-sum purchases of office supplies, and continuous use of equipment etc. so as to instill the consciousness of thorough waste elimination into individual workers including top officials.

*3 Webpage address about the team for overseeing / streaming budget of the Ministry of Health, Labour and Welfare: http://www.mhlw.go.jp/wp/yosan/yosankansi/

(3) Public service review through market testing

The "market testing" is a system to utilize competitive bidding between public and private sectors / private sector competing bids so that public and private sectors can compete equally with the aim of crystallizing "active utilization of private sectors", wherein through public-private competitive bidding on public service provision under the competition conditions of transparency / neutrality / fairness the entity with superior advantage in price and quality wins a bit to provide the said service.

The Ministry of Health, Labour and Welfare is an administration close to public's welfare, directly affecting the lives / health and dairy livelihood of individual citizens, and therefore proactively utilizes the public-private competitive bidding beginning at the affairs of receipt of public pension insurance premiums, and Hellowork related services to make efforts to promote "assuring / improvement of quality" and "cost reduction" in consideration of our position.

As to the public pension premium receipt, payment encouragement to delinquents has been implemented step by step expanding regions involved from October 2007 and from October 2009 all pension offices (former social pension offices) brought this mean into operation, and exemption recommendation was added to the entrusted work at the same timing to tie up encouragement of payments and recommendation of exemptions.

In the field of Hellowork related affairs, involving the "carrier communication plaza" (providing recruitment seminars, experience communication, carrier counseling etc. for job seekers especially need concentrative supports), public-private competitive bidding has been taken in from FY 2007 but needs to promote further actions based on the state of achievement.

(4) Efforts in independent administrative corporation and public interest corporations

The affairs of Ministry of Health, Labour and Welfare is not all handled by the ministry or local government and also largely depends on independent administrative institutions and so-called "public interest corporations" under supervision of administration. Nevertheless, the public perception is still negative wherein there is criticism whether about the relationship of outside entities and administration they are actually where retired bureaucrats parachuted from heaven, or where to accelerate wasteful expenses by spending national grants as "unnecessary indirect costs".

Of these, independent administrative institutions are entities aiming at quality improvement and activation of services, efficiency enhancement, self-sustaining operation and transparency improvement by separating policy implementing sections on certain affairs / projects from office's and ministries' administrative activities and government's granting a corporate state to each of them. Those within jurisdiction of Ministry of Health, Labour and Welfare are 22 corporations (including two under co-jurisdiction with another ministry) (as of April 1, 2010). However, about those institutions there are issues pointed out, such as need of adjustment of their current salary level higher than the nation's to a proper level or review of fringe benefits, as described below, and there is a criticism that those are perhaps prone to hotbeds of accepting "parachutists". It is already decided to review the modality by entire government, but the Ministry of Health, Labour and Welfare itself started to evaluate their business contents strictly. So-called "public interest corporations" means the incorporated associations / incorporated foundations with foundation approval / supervisory instruction by a governing agency in accordance with the Civil Code, and in line with a new system started from December 1, 2008 their business contents will be judged whether they contribute to public interests by the end of November 2013, and making transition to public interest incorporated associations (foundations) or general incorporated associations (foundations) (during this period, called "corporations authorized by special provisions of the Civil Code"). These corporations also have criticism same as independent administrative institutions and to carry out thorough review from the view of citizens is an urgent task.

1) Superfluous expenses reduction etc.

(Cutting unnecessary expenses of independent administrative institutions etc.)

As part of the "Instruction on compiling processes of FY 2010 budget bill of Ministry of Health, Labour and Welfare" (October 2009) by the Ministry of Health, Labour and Welfare, it is decided to "strictly check for any superfluous expenses (unnecessary costs) in independent administrative institutions, public interest corporations, authorized corporations and designated corporations ",the Ministry of Health, Labour and Welfare issued requests to independent administrative institutions under its jurisdiction for "waste reduction in expenditures" and "adequacy of contract" concerning own business operations in November 2009.

For expenditure cutbacks, adopting a structure to assess the aspect of "cost consciousness / wastefulness elimination" through the personnel evaluation system, discontinuing of recreation expenses, efficiency enhancement of official vehicles / vehicles for commercial use and moderation of taxi usage are requested.

In November 2009, the "checking / reviewing of contract conditions of independent administrative institutions" adopted at a Cabinet meeting decided to implement thorough reviews on noncompetitive contracts freely placed, and to check and review general competitive bids whether true competitiveness is ensured. In response to the said cabinet decision, the Ministry of Health, Labour and Welfare requested that a contract audit committee" consisting of auditors and outside experts be established to check / review the contracts of independent administrative institutions and to conclude contracts via general competitive bidding (awarding at minimum price) in principle.

Toward authorized corporations / special private corporations, efforts at waste cutbacks in expenditure with reference to requests to independent administrative institutions are requested.

As to public interest corporations (corporations authorized by special provisions of the Civil Code), extravagant allowance for entertainment and rent fee for the office shall be checked at periodical on-site inspections, especially the corporations wherein a percentage of management costs in total expenditure is exceeding a half shall be instructed to clear them up.

(Clearing of internal reserve of public interest corporations (corporations authorized by special provisions of Civil Code))

At the same timing in November 2009 as to the public interest corporations (special corporations pursuant to Civil Code) with retained ratio exceeding 30%, improvement plan to balance out the excess reserved up to the end of March 2010 was requested to submit,

and if it does not succeed on-site inspections or equivalent measures shall be taken. The corporations where subsidy is granted by Ministry of Health, Labour and Welfare shall be examined respectively on the basis of not allowing subsidies etc. equivalent to the amount of internal reserve in and after FY 2010.

2) Salary level adjustment / fringe benefits review

The policy evaluation / independent administrative institutions evaluation committee of Ministry of Internal Affairs and Communications expresses an opinion about the evaluation results on the fiscal year issued by each ministry's independent administrative institutions evaluation committee, and the FY 2008 opinion (December 2009) noted fringe benefits and welfare cost not stipulated in laws as well as adequacy of contracts. As to independent administrative institutions within the jurisdiction of the Ministry of Health, Labour and Welfare, in response to the fact that 10 out of 16 corporations have allowance higher than nation's and/or an independent allowance, the reasonability of their salary system was referred to not being examined.

Taking this into account, the Ministry of Health, Labour and Welfare issued following requests to each independent administrative institution.

- The salary higher than nation level shall accord to it or that of the Ministry of Health, Labour and Welfare.
- Any benefits package that does not exist in government system shall be abandon if it is not indispensable for business / service operations.

As for salary level, some independent administrative institutions was requested to consider if their salary level is able to change equivalent to that of national government employees because the current level is higher than national government employees'. In addition, in May to June 2010 the independent administrative institutions and the corporations authorized by special provisions of Civil Code within jurisdiction of the Ministry of Health, Labour and Welfare that strongly relate to the nation were requested that their insurance premiums payment be changed to equally shared by employer and employee, same percentage as the national government because the employer' percentage of premium payment for a certain health insurance society is increased beyond a half.

3) Eradication of retired bureaucrats dispatching to independent administrative institutions (Reduction in the number and open recruitment of management posts in independent administrative institutions)

On September 29, 2009 "policies of immediate measures concerning executives' human resource independent administrative institutions" was decided by the cabinet, at the

expiration of the executives' personnel in independent administrative institutions at the end of September, the number of executives was reduced (two posts) and nine posts where retired government employees charged in were offered to open recruitment. As a result, four posts were hired from private sectors, not from government employees (due to no right person for three posts, public recruitment reoffered). At the end of February, 2010 the executive personnel to be expired at the end of March were reduced in number and adding five posts (five posts hired from private sectors, not government employees), 17 posts in total were given recruitment process. As a result, 14 posts were filled with personnel from private sectors, not from government (no right persons for three posts, open recruitment reoffered for one, and two cut back after reconsideration of necessity of posting). In June special public corporations, special corporations, government-affiliated corporations and corporations authorized by special provisions of Civil Code were requested that at the timing of expiration of term or leaving the posts where retired national government employees were installed any new personnel should be selected via open recruitment in principle.

(Abolishment of temporary employment for division / department chiefs and above levels) With regard to temporary officers in independent administrative institutions, it was found that their salary was not paid from personnel costs, and there were some cases they were well-treated equivalent to executives where their salary was not subjected to disclosure due to the style of contracts as temporary employment. In response to this fact, the posts of temporary employees (for division / department chief level and above) were abolished by March 2010.

© Current Efforts on Personnel Management and Re-employment Publicizing ministry' and bureau's goals, conducting open recruitment for executives of independent administrative institutions under the jurisdiction, and abolishing temporary posts in independent administrative institutions under the jurisdiction etc. (Implemented approaches)

- 1. Personnel management
- As the first step of changing the administration culture, personnel evaluation standards has been improved since October last year.
- Constructing the operational goals focusing on three perspectives of "cost consciousness" / elimination of wastes", "adoption of the ideas of customer services toward system reforms", "information collection / disclosure of public works relating to citizens' lives / properties"

- In January this year, the "Project team for studying personnel evaluation" consisting of outside experts was formed. Reviews of personnel evaluation standards and consideration of ideal personnel are under discussion.
- In April this year, based on the discussion by the said project team new organizational goals of the ministry and bureaus that are the key of fundamental organizational operation were set forth and announced.

2. Re-employment

- Progressive approaches to open recruitment for independent administrative institutions that the whole government is struggling has been taken.
- January: Selected nine posts in four corporations from the public (private sectors: four, retired public employees: two, open re-recruitment: three, reduced posts before open recruitment: two posts)
- April: Selected 17 posts in eight corporations from the public (private sectors: 14, retired public employees: none, reduction: two, open re-recruitment: one)
- o Subsidies / outsourcing expenses to independent administrative institutions or public interest corporations of which successive five or more chairpersons or executive board members were selected from retired national government employees were reduced. (▲ 101.3 billion ven)
- Re-employment of temporary posts (annual salary of six million yen or over) in independent administrative institutions was abolished. (22 posts in five corporations by the end of last year)
- To the special private corporations that re-employ personnel successively five or more from the Ministry of Health, Labour and Welfare have been appealed for open recruitment.
 (14 corporations, the end of last year)
- To the corporations authorized by special provisions of Civil Code where workers aged
 or older who retired the Ministry of Health, Labour and Welfare stay in office have been appealed against reappointment of their posts.

(Future tasks to consider)

- 1. Personnel management
- To study improvement of the personnel evaluation system at the "project team for personnel evaluation" from the perspective of operation / system is necessary, and based on the study operational improvement is to be promoted and a request to the authority for necessary approaches is to be made..

2. Re-employment

o Based on efforts as a whole government, constant reviews will be made.

(5) Implementation of in-ministry budget screening

Responses to "budget screening" by the Government Revitalization Unit were aforementioned, and in addition the Ministry of Health, Labour and Welfare has been independently promoting an "in-ministry budget screening" concerning works / services and the modality of independent administrative institutions and public interest corporations etc. within the jurisdiction.

1) Purpose

The "in-ministry budget screening" aims to check the proper use of citizens' tax and insurance premiums without spending "unnecessary indirect costs", with intent of gaining public trust based on the public recognition as "no 'wastefulness' in the Ministry of Health, Labour and Welfare", and specifies "Eight principles" of that "The Ministry of Health, Labour and Welfare voluntary carry out the screening for self-reform", "it is positioned as a regular function, not only this year", and "discussion with outside persons and disclosure shall be adopted" etc.

2) Establishment of "Budget screening office"

To continue the efforts at "budget screening" avoiding transitory effects, the "budget screening office" was formed in the ministry. Three of "Project teams for studying actual situation" in the said office have strived to grasp the actual situation of works subject to screening in advance.

Reviewers of budget requests in "in-ministry budget screening" consists of one participant invited from general citizens, the monitors of the Ministry of Health, Labour and Welfare as well as outside private sector's experts, the video of the process is posted on the website after the process, and public opinions for reform plan are invited on website, which all aims at processes open to public and gaining public understandings.

During the processes of screening, reviewers will have a discussion based on the provision of reform plan by the targeted corporation and the points of information by the said office collected, and then show their opinions for suggested reform plan, for instance, it is adequate or not, if not which one is appropriate, "discontinue", "shift to municipalities etc.", or "continue to operate but further review required"? In line with these opinions and discussed contents, top three of the ministry will decide the final reform plan.

3) Past performance

On April 12, 2010 the first "in-ministry budget screening" began targeting at independent

administrative institutions within the jurisdiction and expanded the target including public interest corporations and affairs of budgeting, and as a result 15 times were held in total by July 1. The targeted corporations totaled 15, and targeted administrative affairs / projects totaled 15. Based on the result of the screening, the final reform plan has been under consideration.



Picture of in-ministry budget screening

- 3 Efforts toward System Improvement
- (1) Minimization of "Confuse when in System Adoption"
- 1) Confusion when in implementation of healthcare system for the latter-stage elderly

Today, during the process of drastic change in the economic society beginning at acceleration of declining birthrate and an aging population, the social security system faces various tasks, but it is nevertheless important to make continuous efforts to adjust to the change of the economic society. In the scene of new system planning / adoption, it is also necessary that understanding of actual situation of impacts caused by adoption, establishment of operational structures necessary for system implementation, and publicity about the new system should be well prepared to because the social security system relate to individual citizens, directly connecting to their daily lives.

However, while in the past the planning of systems pivoted on advantage among entities concerned, efforts to grasp the opinions from persons involved lacked and in the timing of system adoption practical operation structure tended to be neglected, which caused great confusion due to direct connection between the Ministry of Health, Labour and Welfare and public daily lives.

The healthcare system for latter-stage elderly*4 administered from April 2008 was generated because the former healthcare system for the elderly fell into critical situations in financial operation due to high percentage of contributions from healthcare insurance society etc., and consequently after 1997 the entities concerned had a discussion on new system creation, and the conclusively complied ideas on its creation was submitted to the

ordinary Diet session and approved as amendment to the related Act. However, a lack of consideration for the elderly representing the name of "Latter-stage elderly" was raised as a big issue, and enough understanding about the contents that insurance system is separated / divided from the one before the age by reaching 75 years, that the insurance premiums is deducted from the pension in principle was not obtained from the elderly, and preparation and publicity for two years up to new system execution were also insufficient, inviting large unrest and confusion.

2) Solution of issues in the current system and development of new system

The Ministry of Health, Labour and Welfare decided to discontinue the latter-stage healthcare system and to shift to a new system by around April 2013 in order to obtain public understandings and trust. In the meantime, the current system will continue and therefore, prompt efforts to overcome the issues existing in the system are to be made.

Particularly, the current measures for reducing burdens shall be continued and in addition as a cost to continue the measures for reducing the charges for people aged 70 to 74 to medical care institutions to 10 percent, for lowering insurance premiums for low income or nonworking dependents of insured persons 290 billion yen was budgeted to a second supplementary budget, necessary amendment was submitted to the diet session and approved on May 12, 2010 (Section 5-6-(1), Chapter 2 of Part 2).

Requests for in-principle prohibition of issue qualification certificates, for resuming aid for complete medical checkup, and for formulation of plan and steady approaches toward increase of the aged persons' checkup rate were offered to each cross-regional federation of healthcare system for the latter-stage elderly. In addition, at time of FY 2010 medical fee revision, medical fee limited to people aged 75 and over (17 categories) for consultation with medical professionals about treatment course in terminal phases, physicians attending both physical and mental care for the elderly were no longer discontinued *6 (Chart 2-3-3). In regard with the modalities of the new system after abolishment of the healthcare system for the latter-stage elderly, the "council for reforms of healthcare system for the elderly" was formed including the elderly as well as experts and representatives of associations concerned under the auspices of the Ministry of Health and has repeatedly discussed toward finalization by the end of 2010 based on six principles such as "targeting at solve the issue of classification by age that exists in the healthcare system for the latter-stage elderly", "review for widening of municipal national health insurance" (Section 5-6-(2), Chapter 2 of Part 2).

*4 In the situation of a possible increase of medical fee owing to the aging of population, in order to clarify the burdens between the elderly persons and the working generation, an independent healthcare system applicable to the persons aged 75 and older has been established.

*5 The qualification certificate is an alternative card issued instead of insurance card in the case that an insured person does not pay insurance premiums over one year without particular reasons, and if given the person is charged 100% of medical fee at medical facilities once and can get back the amount that deducts self-payment rate on payback application.

*6 Some were re-established applicable to all ages etc. after being abolished once.(9 items)

Chart 2-3-3 Medical Fee for the Elderly at the age of 75 or older

Abolition of medical fee points for the elderly at the age of 75 or older

- Assessment of doctors in charge of management of whole mind and body should not be conducted exclusively for the elderly.
- Lifestyle related diseases management fee, overlaps with the points for the elderly at the latter stage of life, expands the target to patients in all ages.

Medical fee for the elderly at the age of 75 or older: 600 points \rightarrow Abolished

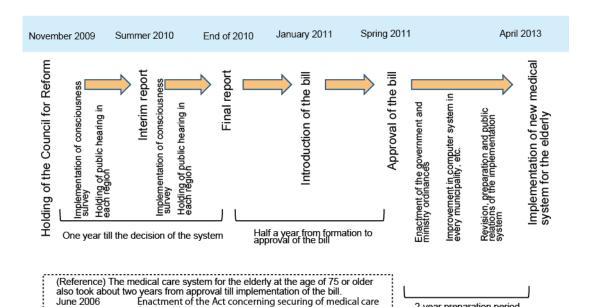
Abolition of the points of consultation and support fees for terminal care for the elderly at the age of 75 or older Nation's agreement on medical fee assessment has not been obtained yet. Consultation and support fees for terminal care for the elderly at the age of 75 or older: 200 points → Abolished * The term of "the elderly at the age of 75 or older " Other medical fee points relating to the elderly at the age of 75 or older will be eliminated. → expanded to the all ages in principle (Example) Specified hospitalization basic fee → Specialized hospitalization basic fee for the elderly at the age of 75 or older (handled in the same manner as it used to be by submission of the status report on support for discharge from hospital) Management fee of in-home medical care for oral and
→Management fee of in-home medical care for cavity function for the elderly at the age of 75 or older dental diseases Information supply fee for the elderly at the age of 75 or older at discharge from the hospital Drug management instruction fee Addition of drug compliance instruction at discharge from the hospital at discharge from the hospital to the pharmaceutical management and counseling services fee → Other revisions (Example) Nutrition and dietary management fee at discharge → Abolishe from hospital for the elderly at the age of 75 or older (Responded by nutrition support team addition) <u>Discharge</u> coordination addition for the elderly → Discharge coordination addition for the ward for acute patients at the age of 75 or older (Patients at 65 and older will be the target to promote cooperation with long-term care.)

In parallel with discussion in "council for reforms of healthcare system for the elderly",

conducting wide survey on public consciousness beginning at the elderly and regional public hearing so as to collect detailed public opinions the consideration on this matter will be accelerated.

As for implementation of consciousness survey and regional hearing both are decided to be implemented in two stages, before "interim report" (summer of 2010) and before "final report" (autumn of 2010), so that those results can be reflected in the discussion on modalities of the new system.

Of these, in May 2010 the first phase consciousness survey was made among 4,400 people aged 20 and over and 220 of experts of the field of social security. Its methods and survey forms were decided by taking in specialist opinions collected from panel discussions.



(Planned) Schedule until the Start of the New Medical System for the Elderly

(2) Efforts at Policy Evaluation (Weighting on Customer service) etc.

Implementation of the medical system for the elderly at the

for the elderly

age of 75or older

April 2008

The solutions of issues in the healthcare system for the latter-stage elderly and efforts toward new system establishment were mentioned in the previous paragraph (1). As a public office handling administrative affairs that directly connects to citizens' lives, the Ministry of Health, Labour and Welfare needs to promote each policy while checking the effect whether it is really beneficial to people lives and to make constant efforts at improvement consistent to changes of the economic society. On this account, the measure for policy evaluation can be raised as a systemic approach that takes in entire activity

 year preparation period for implementation toward system reform concerning whole policy.

1) Framework of policy evaluation

The policy evaluation is to provide important information for appropriate performance of activities based on policy plans or policies by timely grasping the effects of policies and making consequent self-evaluation from the view of necessity, effectiveness and efficiency. Adopting the policy evaluation in management cycle of policies; key elements, Plan, Do, Check, and Action and practicing it allows the quality of policies to improve and awareness of officials to raise, so as to realize an effective, quality output-oriented administration close to citizens' eyes and to fulfill the accountability of the administration to the public.

For this reason, from April 1, 2002 the policy evaluation has been in practice based on the "Government Policy Evaluations Act" (hereinafter referred to as "Policy Evaluation Act") that was set force in order to enhance the viability of the policy evaluation with a view to further improvement of reliability to the public.

2) Efforts at Policy Evaluation by Ministry of Health, Labour and Welfare

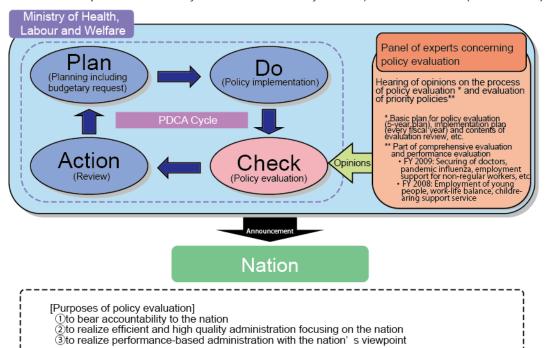


Chart 2-3-5 Implementation of Policy Evaluation at the Ministry of Health, Labour and Welfare (Since FY 2001)

*Implementation pursuant to the Government Policy Evaluations Act (Act No. 86 of June 29, 2001)

The Policy Evaluation Act stipulates that each administrative organ shall decide on the mid-term plan and annual plan, prepare a report of evaluation results and publicize it. In response to it, the Ministry of Health, Labour and Welfare has conducted the policy evaluation based on the second "Basic plan concerning policy evaluation in Ministry of Health, Labour and Welfare" (second basic plan) specifying basic matters on policy evaluation.

The second basic plan designates the mission of The Ministry of Health, Labour and Welfare as "to contribute to quality enhancement of future public living and development of the social economy through social security policies / labour policies so that individuals of citizens can exert their power over their families, works, and / or regions etc. to support each other and to live their lives without fear or anxiety", and for fulfilling this basic philosophy the policy evaluation should be reflected in the policy appropriately and consequent efforts at providing citizen-oriented policy operations and services should be made.

Looking at the reflection state in policies, as an example of policy cancellation as a result of evaluation, leading to budget request withdrawal there is the "Promotion of work style reform total project". It was a program to provide a subsidy to business owners of small and medium-sized companies that strive actively to correct long-hour working through work style review, but it was cut on the account of duplication of another subsidy providing program set up in FY 2008.

As examples of budget request submission for solving a problem a result of evaluation, there are the budget request for increase in the "medical devices international joint development / approval promotion expenses" and the requests for increase of new pharmaceuticals / medical devices reviewers. To offer new pharmaceuticals / medical devices promptly with high efficiency / safety the target percentage of completion during review process (for new pharmaceutical 80%, for new medical devices 90%) were laid out. Nevertheless, in FY 2008 the targets were not achieved leading to so-called "Drug lag" or "Device lag" (the pharmaceuticals / medical devices approved in foreign countries are unable to provide the public due to incompletion of approval process in Japan). Hence, the budget necessary for accelerating approval review procedures was reflected in the budget requests with the view to overcome this issue.

^{*7} For the detailed information about efforts at policy evaluation by Ministry of Health, Labour and Welfare, refer to the website of the ministry: http://www.mhlw.go.jp/wp/seisaku/hyouka/index.html

3) Enhancement of policy evaluation by establishing a new office which is provisional called "Service Level Improvement Office," etc.

The importance of the policy evaluation is growing as a vehicle to improve the governmental services in accord with the citizens' expectations. In response to such trend, the Ministry of Health, Labour and Welfare has initiated the following check (evaluation) functions as from the FY2010 to improve its policies.

① Establishment of the "Service Level Improvement Office"

The Ministry of Health, Labour and Welfare is directly connected with the daily lives of citizens, and therefore it is absolutely imperative for it to keep the citizens' perspective. It is necessary for the administration staffs to reduce information gathering and paper work at Kasumigaseki (center of Tokyo), to capture more voices of the users of their services (citizens), and to reflect them in the formation of policies. To satisfy such needs, the "Service Level Improvement Office" shall be established which consist of a head of office and 3 survey specialists. All of them shall be hired from outside via open recruitment. The said office will grasp the present situation of policies implementation, measure their effectiveness and suggest improvement plans, utilizing the recommendations made by outside experts as well.

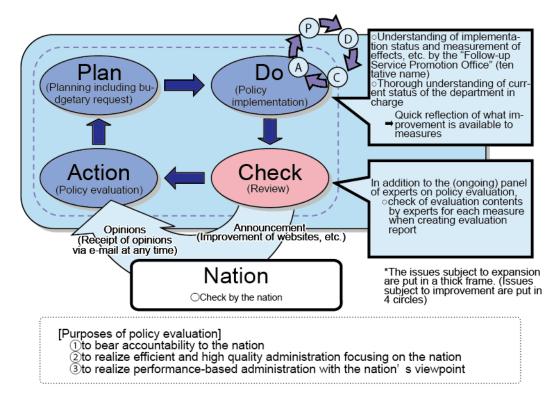
2 Thorough grasp of present policy implementation

A mechanism shall be developed to help the bureaus/departments in charge comprehend the actual circumstances of their policies much more quickly and in details through receipt of appropriate reports from the operators of services, analysis of the causes of complains and inquires from the users of services, and communication with local government officials.

3 Increase of the use of outside experts in the policy evaluation

The third parties (outside people such as lawyers, certified public accountants, academic experts, media representatives and so on) have been called to the advisory panels often in the past to provide their knowledge and opinions in the policy evaluation. On top of this, their opinions shall be sought in the future in the design phase of the evaluation scheme of each policy

Chart 2-3-6 Expansion of Policy Evaluation at the Ministry of Health, Labour and Welfare (Since FY 2010)



4 Inclusion of the public opinions in the policy evaluation

The website forms and contents of the Ministry of Health, Labour and Welfare shall be improved such that the public can understand the policy evaluation better and give their opinions. The website is expected to capture public opinions about the methods and results of policy evaluation on the 24/7/365 basis, and lead to citizen-oriented administrative operations.

4) Promotion of work improvement

The policy evaluation is a ministry-wide / structural approach systemically adopted for improvement works covering entire policies, and in parallel it is also important to pursue constant review of administrative affairs in daily works. For the sake of it, for example, from March 2010 the cases of improvement in information provision, simplification of application procedure have been posted every week on the website of the Ministry of Health, Labour and Welfare, and through the "Hellowork service improvement contest", and the "Pension offices service contest" that is held in the Japan Pension Service, efforts to share / spread work improvement or/ and service enhancement to nationwide have been made. An project team consisting of youth officials collected from open recruitment was set in Ministry of Health, Labour and Welfare and studied each item of six themes: "work improvement /

streamlining", "service enhancement", "public voices", "volunteer / NPO cooperation", "strengthening of comprehension of actual circumstances" and "communication skill", and reached to coordinate the suggestions free from precedents into a report in July 2010.In line with the said report further efforts at work improvement, streamlining and service enhancement will be made as a whole ministry. In addition the Japan Pension Service also organized a project team consisting of young employees to study reform plans utilizing fresh ideas and thoughts close to citizens with a view to fulfilling work improvement / service enhancement.

Toward consideration of FY 2011 policies, to gather the knowledge within the ministry beyond jurisdictions the "Policy plan contest in Ministry of Health, Labour and Welfare" was held including all of officials in the ministry. As a result of screening, six of proposals were selected and decided to be promoted toward realization including budget requests, requests for required organization / personnel.





Opening ceremony of "Young project team", Ministry of Health, Labour and Welfare (May 11)

Examples of work improvement (to be publicized every week on website)

4 Efforts at Enhancement of Comprehension of Actual Circumstances / Communication Skills

As described in the Chapter 1, what the Ministry of Health, Labour and Welfare needs to regret is neglect to strive for appropriate operations or improvement of systems, which can be rephrased as lacking of comprehension of actual circumstances and communication skills in organizational abilities. In other words, due to lack of precise comprehension of actual circumstances the operational issues were overlooked or necessity of correction was not perceived. Communication with the public who used the system in fact was also not sufficient, causing failure to provide adequate information or / and failure to reflect the

problem pointed out by the public in policies.

To resolve the root cause of these ability shortages, in parallel with reforms based on past problems by implementing respective policies, comprehension of actual circumstances / communication skills should be improved as an organizational management.

- (1) Initiative in comprehension enhancement for actual circumstances
- 1) Understanding of actual situations for policy planning (policy marketing acumen)

Today, during the process of drastic change in the economic society beginning at acceleration of declining birthrate and an aging population, the Ministry of Health, Labour and Welfare is requested to make continuous efforts in line with changes, but if not consistent to the actual situations nevertheless the systems, even if huge efforts were put to establish, become resultless due to misjudge the nature of the purpose. Nevertheless, it is undeniable that in the past Ministry of Health, Labour and Welfare lacked comprehension of actual circumstances such as no survey implemented for grasping public situations, or method or benchmarks to grasp the situations not set in some field or analysis of survey results not sufficient.

For this reason, as a first step toward accurate understanding and appropriate measures in October 2009 the relative poverty rate was publicized. *8

*8 (About the relative poverty rate is described in the Section 3 – 1, Chapter 2 of Part2. For the official material for disclosure, refer to

http://www.mhlw.go.jp/houdou/2009/10/h1020-3.html.)

With regard to the issue of poverty and gap, the people's "minimum standard living" guaranteed in Article 25 of the Constitution of Japan, the State has not specified the concrete criteria, or national minimum, in other words what the minimum standard living is, and furthermore it is uncertain that the minimum standard living is actually protected by the administration. As the first step the poverty rate was publicized, but to establish the standard for national minimum and to confirm that the national minimum is ensured, it is necessary to continue to conduct surveys or researches for grasping the actual situations. (For researches on standard / indicators toward ensuring national minimum, refer to Section 3-2, Chapter 2 of Part 2).

As to health welfare policies for the disabled, the Services and Supports for Persons with

Disabilities Act was abandoned and a comprehensive system along ability-to-pay principle was decided to be established. To comprehend the current situations and lead to an appropriate policy, in November 2009 the result of "Actual situation survey on users' burden etc before and after enforcement of the Services and Supports for Persons with Disabilities Act" was summarized and publicized. In line with the results, from April 2010 the disabled with low income (municipal tax exempts) has been eligible for free of charge for welfare services (for consideration of new system establishment, refer to Section 9 – 1, Chapter 2 of Part 2)

Regarding the administration of the ministry of Health, fundamental reforms in system such as pension system, healthcare system for the elderly is planned to implement, and it is necessary to strengthen the comprehension of actual circumstances prior to policy planning so as to lead to raising the quality of people's living.

Column

Approach to the analysis of the results of medical fee provision

An example of improvement and follow-up measures based on the PDCA cycle is an analysis of the results of medical fee revision by the Central Social Insurance Medical Council (CSIMC).

The CSIMC established "Subcommittee to analyze the results of each medical fee revision" composed of tripartite committees (medical service providers, payers and public interest committee) from the perspective of "whether the medical fee revision is achieving intended effect" on the basis of "To restart the Central Social Insurance Medical Council" (Report from the Council of Experts on management of the CSIMC in July 2005) after the revision in FY2006, and analyzed the results of the questionnaires on key revised items to utilize them for the next revision.

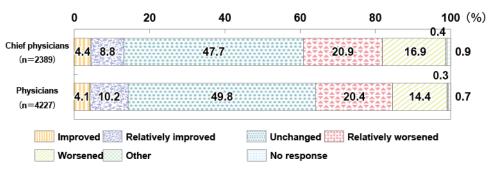
Toward the revision in FY 2010, the results of the following items were analyzed :"Reducing burdens of physicians in hospital", "Review of significance of outpatient management addition", "The situation of use of generic drugs", "Research of the actual situation of implementation of appropriate medical treatment to the elderly aged 75 and older (treatment fee for the elderly aged 75 and older and consultation support fee for the elderly aged 75 and older at the terminal stage), "Survey of the situation of implementation of partial obligation to issue a receipt", "Regarding wards of 7:1 basic hospitalization fee calculation" "Evaluation of the quality concerning the recovery stage rehabilitation ward fee", "Addition to the management of the dental outpatient treatment

environment" and "Success rate of abstaining from smoking by authorized insurance medical institutions which calculate the nicotine dependence management fee".

We will introduce one of revised contents of "Reducing burdens of physicians in hospital" on the basis of the verifications among of the measures requiring reform according to the verifications such as "abolishment of guidelines for consultation time of '5 minutes or longer' in the outpatient management addition", "abolishment of treatment fee for the elderly aged 75 and older and consultation support fee for the elderly aged 75 and older at the terminal stage" and "Extension of obligation to issue a receipt".

(1) Evaluation of improved hospitalization service at the accurate stage

In the survey in December 2008 implemented by the CSIMC, we asked physicians about their working situation compared to year earlier. While chief physicians (in managerial posts) who answered "Improved" or "Relatively improved" accounts for 13.2% and the rate of the same answer from physicians (other than chiefs) was 14.3%, the answer of "Relatively worsened" accounts for 37.8% and that of "Worsened" accounts for 34.8%. Besides, according to the survey of the Medical Economics Division, Health Insurance Bureau in September 2009, working hours of the surgical department is the longest and 58.6 hours per week among of working hours of each department, and every researched department works over 50 hours per week.



Working condition compared with one year ago (doctors)

Source: Special survey concerning the verification of the results of the medical treatment fee revision in 2008 (CSIMC Verification sub-committee on the medical treatment fee revision)

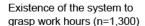
Considering the severe working environment of physicians, in terms of "hospitalization basic fee for general hospitals" that is a base of medical fees for hospitalization, while raising addition for hospitalization at the early stage which requires especially intensive treatments and examinations, even if they cannot calculate high points of "hospital fee of general hospitals" due to lack of the only condition of night duty of nurses/doctors, "hospitalization basic fee for general hospitals" of 80% of the actual points can be estimated with conditions like that they strive to employ nurses/physicians to cover night

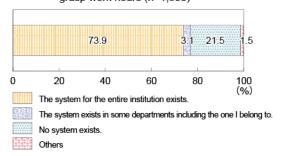
(2) Evaluation regarding reduction of burdens of physicians

According to the results of the survey by the CSIMC mentioned above, the most effective measure to reduce burdens of chief physicians was "staffing of clerical works assistants for physicians".

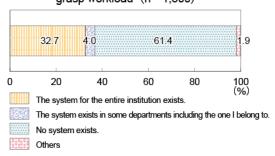
Clerical works assistants for physicians are in charge of assisting physicians for paperwork such as producing medical certificates and medical records, and on the basis of the survey, it is decided to pay more for "one assistant for 15 physicians", being changed from the previous highest standard "one assistant for 25 physicians", in addition to rising "addition to the system of clerical work assistant for physicians".

The survey clarified that the "effective" measure next to the measure to staffing assistants and increase of the number of physicians was "transfer of nurses etc. in charge of clerical works to co-medical staff". Improvement of a personnel system by increasing medical employees beside physicians is to ease the burden of physicians in hospital and to help provide higher quality treatment.

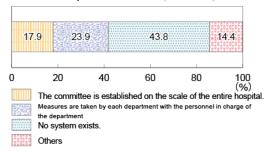




Existence of the system to grasp workload (n=1,300)



The system to make improvement when a problem occurs (n=1,018)



Source: Prepared by the Office of Counsellor for Policy Evaluation based on the survey conducted by the Medical Economics Division, Health Insurance Bureau of MHLW for FY 2009

Therefore, new systems were established in accordance with the medical fee revision in 2010 as follows

- ① in order for nursing personnel to focus on works which only they can manage while covering a part of physicians' works, if certain number of nursing personnel are stationed to cover inpatient treatment at the acute stage, the system to consider staffing of nursing assistants under specific conditions was established, and
- 2 the system to evaluate "Nutrition Support Team" including pharmacists and national registered dietitians, and "Respiratory Care Team" including clinical engineers, physical therapists and others.

(3) Evaluation regarding improvement of the working condition of physicians in hospital

According to the above survey by the Medical Economics Division, Health Insurance Bureau, while 73.9% of physicians respond that "there is a system to grasp actual working hours of physicians", 61.4% says "no system to grasp the workload of physicians" and 43.8% points out "no system to improve the working conditions in case there are problems".

Although those answers include cases that they do not know that there are systems, it is thought that the systems in hospital are not good enough to reduce the burden of physicians.

On the basis of those facts, in the medical fee revision in FY 2010,

- ① as evaluating of staffing of nursing assistants and that of nutrition support team/respiratory care team mentioned at (2), it must be required to set up "the system to ease burdens of physicians in hospital and improve their treatment" and
- ② as for "the system to ease burdens of physicians in hospital and improve their treatment" which is a requirement for other existing points, the revision of requirements has been conducted "to grasp working conditions of physicians in hospital concretely", "to grasp working conditions and burdens of physicians in hospital and to appoint a person who is in charge of suggesting improvement measures" and "formulate a plan to ease burdens physicians in hospital including concrete efforts and setting a target year to achieve these efforts and to report the achievement situation once a year".

Although survey has a limit, discussion on the basis of evidences is made after grasping the voice of the medical institutions and that of patients in the deliberation of the Central Social Insurance, and it is utilized to reorganize the medical fee revision items and set up medical fee points and requirements to calculate the points.

Efforts shall be made constantly to review the medical policies and other fields according to so-called "PDCA cycle".

2) Grasp of actual conditions for employment measures

To understand the front-line conditions on employment measures, in October 2009 the "employment measures project team for grasping circumstances" (consisting of young officials of Employment Security Bureau and Human Resources Development Bureau) was formed, of which the members are dispatched to various regions nationwide to grasp the actual situations of policies and problems through interviewing to users or having communication with person in charge of practical works and submit a report on improvement plans every week.

[Examples of past approaches]

① Case example concerning "Urgent human resource development support (government funded training)" *9

It is decided to encourage effective dissemination of the said policy to the public and grasp the application state etc. on each training course. The organization for curriculum instruction (Employment and Human Resources Development Organization of Japan) and Hellowork shall work in coordination to seek appropriate training providers so as to adjust the training subjects to the regional demands of companies seeking workers and job seekers.

② Case examples concerning "Job assistance for fresh high school graduates"*10

*9 Urgent human resource development support (government funded training): a measure taken from July 2009 where opportunities for job trainings are offered to job seekers who are not eligible for benefits of the employment insurance, and in the case of satisfying certain conditions concerning income or property, livelihood support grants are provided during the training period.

*10 Job assistance for fresh high school graduates: With the cooperation of schools, Helloworks provide various support measures such as job information, worksite visit, and personal consultation for the students who are not assured of a job.

The job supporter for high school graduates placed in Helloworks shall visit as many high schools as possible to provide the information of Hellowork support services and to give them appropriate advices. For deepening understandings on high school side, executives of Helloworks shall also visit high schools in a proactive manner.

③ Case examples concerning "matching support for care workers" *11

It was decided to provide Helloworks with the information of demands on job offer etc. that are obtained by care worker support center staff at time of visit to nursing care companies. For efficient explanation on support services by the support center staff to the care companies, leaflet listing service contents was prepared.

*11 The welfare job section of Helloworks and the Care Worker Support Center, which promotes improvement of workforce management for nursing care business, work together

to promote matching support for care works.

3) Grasp of actual circumstances for system operation (policy evaluation ability)

A new system cannot be left after being built up, and constant efforts at improvement need to be made for the system. Toward the Ministry of Health, Labour and Welfare, a lot of public voices of opinions about policies / system planning, proposals on system implementation, complains, criticism, and other comments have been sent.

Though these public voices can be gold mine leading to a clue for system reforms, they were not figured out in what type of voices was sent as an administrative organization. The reason is exactly that The Ministry of Health, Labour and Welfare lacked the ability to perceive the circumstances, which should be deeply regretted.

In response to this, the opinions and complains received on and after October 23, 2009 have been gathered weekly and major opinions and corresponding countermeasures have been publicized by bureau. On the website of the Ministry of Health, Labour and Welfare there is a menu, same as the right side image on this page, for accepting public comments on system improvement etc. The compiled results of public opinions concerning system improvement etc. are available on the website, and from March 29, 2009 the ones toward regional bureau offices were gathered and publicized in addition to the central offices'. The received voices totaled 103,586 cases as of June 28, 2010 in which there are a lot of severe dressing-downs, and the Ministry of Health, Labour and Welfare will sincerely accept them and connect them to improvement.

As a structure to reflect the public voices in policy planning, and system implementation, some people who applied have been requested for monitors on the ministry's administration. The term of monitors is one year, and in FY 2010 504 people were requested and they have been providing their concerns noted in daily lives, thought, experiences concerning issues of the Ministry of Health, Labour and Welfare. And the "Monitor conference on administration of the Ministry of Health, Labour and Welfare" has been organized every year, and for FY 2009 it was held on January 17, 2010 with attendance of the minister Nagatsuma to exchange opinions regarding the ministry's issues to be improved.

In April 2010 the promotion council for response to public comments" was established in the Ministry of Health, Labour and Welfare to share and discuss the information about improved matters and measures under consideration in the ministry with the view to connecting the public voices to appropriate improvement.



Chart 2-3-7 Summary Sheet of Opinions and Complains Received from the Nation (Total numbers announced by June 28, 2010)

Breakdown of number of cases by the method of collecting opinions/ complains		(Number of cases)		(Proportion)	
	Visit	3,424		3.3%	
	Telephone	45,417		43.8%	
	Letter	2,822		2.7%	
	Fax	171	[0.2%	
	E-mail	48,998	[47.3%	
	Local governments	2,754		2.7%	
	(Total)	103,586		100.0%	

In addition to systematical comprehension of circumstances, it is also important to hear the opinions straight from users and staff working at practical work sites because practical experiences and the sense obtained in the work site are useful for planning policies based on the collected information on actual situation. For this reason, through meetings of person concerned or such, communication and opinion exchanges between planning sections and the sections handling practical works have been actively made so as to reflect the voice of front-line staff in policy planning, and besides the officials in the planning sections are decided to gain field experiences. To take advantage of these on-site training and meetings, it is imperative to change officials' consciousness to field-oriented one, so top officials beginning at the minister voluntarily visit the fields to foster the consciousness.



Examples of publication on public voice / compiled results (posted every week on the website of Ministry of Health, Labour and Welfare)

Column

Operations of the judicial police in the health, labour and welfare administration ~Missions of the narcotics agents~

1 One weekend of a new narcotics agent

The agent went to work at 2 p.m. on Saturday and analyzing data till 9 p.m. He was off-duty on Sunday but he was called from his office and directly went to the branch office near the scene, then, he discussed on the approach till early morning 4.a.m. On Monday, after going to work at noon, he went undercover, and then staked out with his senior till midnight.

This is one weekend that a new narcotics agent Mr. M working the Ministry of Health, Labour and Welfare. The organization he belongs to is the Narcotics Control Department, Kanto-Shin'etsu Regional Bureau of Health and Welfare that is a regional branch of the Ministry of Heath, Labour and Welfare.

2 Investigation into drug-related crimes by narcotics agents

(1) What is drug-related crimes

It was after the World War II that abuse of narcotics/stimulants became a social problem in Japan. Drug abuse came up with chaos and corrupted social situation caused by the end of the WW II and it is still in an unpredictable situation even it has been already over 60 years since the war came to the end.

The most abused drug in Japan is stimulant and it accounts for about 80% out of arrested persons for narcotics-related crime. Abusing stimulants make you addicted to stimulants and it causes personality disorder. The number of arrested persons for stimulants reached to 11,231 and seized amount is 402.6kg. Compared to 2007, although the number of arrested suspects decreased, the amount of the seized stimulants increased since most of arrested suspects were gangsters of crime syndicates.

The second most abused drug is hemp which people can try rather easily. Hemp effects vision, hearing and perception and intoxicates people, and if abusing it continuously, symptoms like hallucination and delusion come up. Recently, the number of arrested suspects is inclined to increase and it reached a record high in 2008.

Also, MDMA that is pill-type narcotics and can be taken orally looks like sort of pop candies so you can take it without feeling against it. Therefore, it comes in a lot lately.

Abusing MDMA causes heart attacks, cerebrovascular accidents and spasms. Those who use designer drugs like MDMA are mainly young people.

Recently, drug traffic by using the Internet has been increasing. Since it has high

anonymity and it comes in through home-delivery service, it is possible for anyone to get drugs wherever they are without meeting anybody, which fuels drug abuse.

(2) Investigation into drug-related crimes

Investigation into drug-related crimes by the Narcotics Control Department also has a clue for investigation and takes common steps like detecting suspects or clues, acquiring and keeping them and arresting suspects. However, drug-related crimes are highly latent so specialized Department for drug-related crimes put their best effort into gathering more reliable information, judging them correctly and then investigating them carefully. Therefore, it is urged to effectively gather information, build wide networks and as it obtained all kind of information, it analyzes/evaluating them and makes use of them for investigations. Also for investigations, it does secret investigation over and over again and collects evidences thoroughly.

Like the new agent Mr. M coming up at the beginning, new agents have acquired such investigation techniques through firsthand training offered at each turning point in 10 years since they entered in the Department, and have gained experience in investigation at the scene. Besides, scientific verification of drug use is essential for investigations into drug-related crimes so the Department has an independent department for analysis of drugs by the latest precision instruments.

(3) Supervision and instruction on narcotics and psychotropic drugs

The Narcotics Control Department constantly implements in-site inspections to hospitals, pharmacies and pharmaceutical companies in order to prevent illegal sales and illegal distribution of narcotics/psychotropic drugs which are used in medical fields. As for boarding visits, the Department supervises over distribution management if it is proceeded appropriately until narcotics/psychotropic drugs are finally used to patents and others, and can sometimes get a clue of drug-related crimes through boarding visits. Lately, surveillance and supervision has been reinforced targeting specific raw materials of drugs including acetic anhydride that is used to produce heroin.

(4) Consultation and enlightenment

The Narcotics Control Department conducts consultation for families/friends of drug abusers and receives reports from citizens. After conducting consultation, it discusses if the consultation is based on a fact, and if an investigation is needed, while giving appropriate advice, and then if moving forward to the step requiring investigation, it does secret investigation as same as usual investigations. Other than them, it lectures in all kinds of

school and related institutions and conducts enlightenment activities for preventing drug abuse with requests such as lecturing to students of primary school, junior high school and high school on physical/mental damages caused by drugs.

3 Missions of the Narcotics Control Department

Although missions of the Narcotics Control Department is to eliminate drug-related crimes and to keep peace over the country in addition to supervision over drugs, the further mission is at one more step beyond them and it is to realize a sound society without any drug contamination and ultimately to secure citizens' life and health. That's what the Ministry of Health, Labour and Welfare is for.

The narcotics agents are engaged in activities such as preventing illegal use through instructing hospitals, pharmacies and pharmaceutical companies, consultation and enlightenment utilizing their specialties. Moreover, they also carry out rehabilitation for drug abusers together with the Health and Welfare Department.

Besides, since the narcotics agents with the pharmacist license belong to the Narcotics Control Department, they are capable of activities backed up with knowledge as experts in drugs.

The Narcotics Control Department conducts wide activities as one of the organizations of the Ministry of Health, Labour and Welfare as well as an investigation authority, and it fulfills its vocation to protect citizens' life and health by cooperating with organizations relating health and welfare.

4 Challenge to narcotics agents

What propel narcotics agents who have to face dreadful drugs-related crime and who are required of physical and mental strength? Mr. M, a new agent who came up at the beginning mentions that he "acquired a sense to predict suspects' next move after experiencing many undercover investigations" and "has a sense of fulfillment which he can get when investigations are reaching a climax after a few months". It is said that it takes five or ten years to be a full-fledged narcotics agent, as a narcotics agent, he must feel fulfilled that he has been acquiring required skills even little by little, and moreover, getting cases solved.

Also, a more experienced narcotics agent Mr. H (19 years career) told us that what is worthwhile for me is "A sense of achievement as cases have been solved and vocation to prevent drug-related crimes".

While various things are required of narcotics agents since drug-related crimes has been diversified and getting more tricky, Mr. S, an expert agents with 30 years career, told us that

what is most required endowment is "zeal and the sense of justice".

Presently, about 250 narcotics agents work around the clock in the whole country. Zeal and the sense of justice toward realization of a sound social without drug exposure support agents, and it leads them to protect our life and health.



Seized drugs, etc.

Column

The situation of comprehensive employment service in regions ~In the case of Hello Work Sakai~

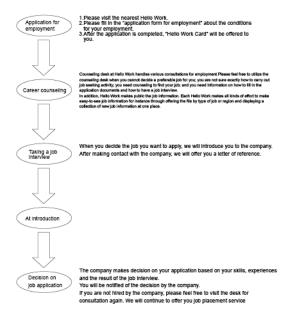
There are 545 Hello Work offices in Japan.

Hello Work is, as the safety-net for employment to jobseekers, the regional comprehensive employment service organization that implements placement and vocational consultation and provides benefits of the Employment Insurance, and that provides a variety of support such as accepting job offers, giving advices/guidance on job requirements, instructing to improve employment management, and offering subsidies related employment for companies.

In this column, we will show a typical example of placement, providing benefits of the Employment Insurance and the One-Stop Service Day held in November 30, 2009 and in late December referring to a case of Hello Work Sakai in Osaka.

Hello Work Sakai has jurisdiction over one of ordinance-designated city "Sakai City" and is located inside the Sakai Jorno Bldg near Sakai City Hall. It opens until 7 p.m. on weekdays and opens from 10 a.m. to 5 p.m. on Saturday to take consultation. Moreover, it has the Mother's Corner and others to closely support various kinds of people like mothers working with childcare.

Procedure of vocational introduction



1. Hello Work

Hello work receives job offers from employers, and introduces those jobs to job-seekers and conducts job consulting.

Hello Work supports job seeking, providing a variety of consultation concerning employment to meet the needs of job-seekers who are not sure about their aptitude and how to get a job.

For those who have not found yet what kind of job they want to take, Hello Work Sakai conducts vocational aptitude test and advises them, and for those who need more specific advises, a full time adviser can support them continuously. Besides, various kinds of seminar are held and positive job support is undertaken.

We will see the following examples that people could obtain a job through close supports from Hello Work Sakai.

<A 39-year-old man, lost a job due to a layoff of the company that he was dispatched as a temporary worker>

His previous work was a lathe operator. However, since there are few job offers of this kind, he decided to broaden his horizons and took job consulting about ten times including vocational training.

He also took the seminar to practice for job interview and to learn how to prepare a curriculum vitae at the same time. Through those supports from Hello Work, he realized that he wanted to use his experience and he applied for a job offer of lathe work, then he got the job.

<19-year-old single mother>

She previously worked at a cash register and offered service to customers in a supermarket. However, in order to stabilize her life, she hoped to be a full-time regular worker, and as a result of consultation at Hello Work, she decided to take a course for fatherless family to acquire the second-grade home helper qualification.

During her training, she eagerly studied in the course and she got hired in a hospital as a helper.

2. Employment Insurance

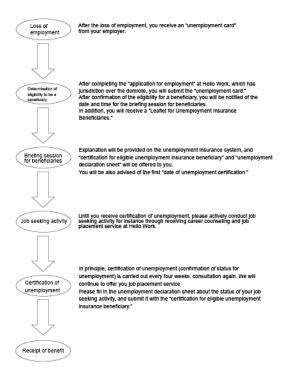
In order for jobless persons to look for jobs without worry about their life and get re-employed as soon as possible, Hello Work offers unemployment benefits with conditions that they should continue job seeking activities such as taking job consultation and job introduction at Hello Work.

Those who require the employment insurance follow the procedure for qualifications to be a beneficiary of the insurance after applying for a job.

Besides, the session is held to explain about important matters on benefits of the employment insurance, informing beneficiaries of the current situation of the labour market within its jurisdiction, job support by Hello Work in addition to explanation of the insurance including reemployment benefits if they are reemployed within a specific period.



Procedure to receive Employment Insurance benefits



3. Support for developing immediate human resources

Support for developing immediate human resources is a system in which those who cannot receive the employee insurance (who can not get any full-time job after graduation, have not paid premiums for the employment insurance because they were an Arbeiter(non-regular part-time) or a part-time worker, or whose employment insurance has been already expired, etc.) can take vocational training (fund training) for free and receive "Work/Family Benefit Program" of Life Benefit during their training (for further details, see "Comprehensive support for vocational training, re-employment and life with 'Support Subsidy for Developing Immediate Human Resources/Employment' "in the Section 6-2-(2) in the Chapter2 of the Part 1).

Hello Work introduces trainings/life benefits and accepts application besides fixing up basic trainings for jobseekers. Hello Work Sakai introduced the "admission card for vocational training" to grasp what job seeker want to consult in advance in January 2010 accompanied by increase of consultation for vocational training, and is striving to shorten waiting time (from two hours waiting time at longest to 45 minutes) by conducting simple consultation first.

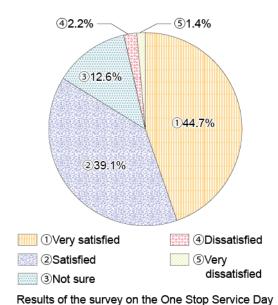
4. One Stop Service Day

Since counseling on vocations is conducted at Hello Work and counseling on housing and life is conducted at the local government office and the social welfare council, some complain that they have to go to several different places for one inquiry.

Hello Work held "One Stop Service Day" that enabled people to consult on vocations, housing and life at one place opened as experimental efforts at 77 places nationally on November 30, 2009 and implemented at 204 places all over the country at the end of December. On both days, Hollow Work received favorable reviews from 80 percent of them.

Moreover, "housing and living support advisers" are staffed at Hello Work so that job seekers in trouble with their housing and life can constantly consult with an adviser for the second Safety-net and relative measures at one place even if it is not "One Stop Service Day", providing comprehensive consultation and introducing available organizations.

How would you like today's One-Stop Service?



held in December 2009 (Nationwide)

(Reference)

- For jobseekers (Website of the Ministry of Health, Labour and Welfare)
 http://www.mhlw.go.jp/bunya/koyou/kyushoku.html
- For those who are in trouble with job, home and life (Website of the Ministry of Health, Labour and Welfare)

http://www.mhlw.go.jp/bunya/koyou/safety_net/p.html

- Hello Work Sakaihttp://osaka-rodo.go.jp/hw/sakai/
- o Looks of Vocational Counseling Window (Hello Work Sakai

(2) Efforts at enhancement of communication skill etc.

The trusted organization is an organization who discloses the contents of their works periodically. Since the Ministry of Health, Labour and Welfare is responsible to the administrative affairs close to the public, it is important to transmit adequate information in easy-to-understand manners so that the information definitely reaches to the needing persons. For instance, it is important that announcement about new system be understood by anyone, transparency of the administration of the ministry be fulfilled through disclosure of information and conferences etc. the ministry is making efforts to promote prompt publicity of information, improvement the website, and creation of simply stated documents. As for organizational measures, some officials who have work experiences of public relations / advertisement and competent to revise media publication materials, brochures / leaflets etc. will be adopted through open recruitment, and in September 2010 the "Document revision support office" (tentatively called) is to be organized. The Japan Pension Service has held the "monitor meeting for creation of letters addressed to customer" (p. 21 Section 1 - 1) to review and improve the documents that is sent to beneficiaries / insured persons from the view point of customers.

Chart 2-3-8 Examples of Materials on Operation Progress to be Periodically Released

Name of material	Start of release	Frequency of release	Remarks
"Ideas and Opinions from the Nation"	November 2009	Once a week	
"Business Improvement of the Week"	March 2010	Once a week	
"Summary of "Implementation Status of the "Measures for Pension Records Problem" etc."	January 2010 (*)	Once a week	Japan Pension Service
"Errors in Clerical Processing, etc."	March 2010	Once a week	Japan Pension Service
"Report on Summary of Clients' Opinions"	January 2010	Once a week	Japan Pension Service
"List of Waiting Time by Hours (Counseling Counter for General Pension)"	February 2010	Once a week	Japan Pension Service

 $^{^{\}star}$ Released by the former Social Insurance Agency once a week since November 2009

Chart 2-3-9 Recently Launched Major Organizations (From January 2010)

(January 1, 2010)

Assistant Vice-Minister for Pension Management, Minister's Secretariat
 Pension Service Planning Division of Pension Bureau and Pension Service Management Division of Pension Bureau
 (Established in conjunction with the Japan Pension Service)

(April 1, 2010)

- Budget Screening Process Office (established under the instructions from the Minister of Health, Labour and Welfare within the Minister's Secretariat)
- Community Transfer/Children with Disabilities Support Office, Welfare Division for Persons with Disabilities, Dept. of Health and Welfare for Persons with Disabilities, Social Welfare and War Victims' Relief Bureau

(July 1, 2010

 Hello Work Service Improvement Division (established under the instructions from the Minister of Health, Labour and Welfare within the General Affairs Division, Employment Security Bureau

(July 30, 2010)

 Office of the Minister for Policy (established under the instructions from the Minister of Health, Labour and Welfare within the Minister's Secretariat)

(August 5, 2010)

• Employment Measures for Dispatched/Fixed-term Workers Dept., Employment Security Bureau

(Following organizations are planned to be established.)

- Support office for plan Language Document (established under the instructions from the Minister of Health, Labour and Welfare within the General Affairs Division of the Minister's Secretariat
- Service Promotion Office (established under the instructions from the Ministlry of Health, Labour and welfare within the office of counsellor for Poliy Evaluation

Also, since Ministry of Health, Labour and Welfare involves the service affairs so it is necessary to deal with the customers in courteous service from the view of them in order to get the customers' satisfaction and regain the trust in the ministry. Previously, insufficient explanation and attitudes not oriented to customers were criticized as "bureaucratic works". The Japan Pension Service is making efforts to change their consciousness aiming at a true service institution as described in the Section 1 – 3, but Ministry of Health, Labour and Welfare also needs to strive enhance communication skills and offer the service necessary for the customers based on their demands. In May 15, 2010 "session concerning Nursing care insurance with the Minister Nagatsuma", on July 24 "Session concerning pension scheme with the Minister Nagatsuma" were held, and through these approaches the ministry will continue to strive to reflect public opinions in policies.

To disclose even negative information voluntarily and correct the issue is also important key for becoming a trusted organization. Toward promoting information disclosure, the one impacting peoples' lives or properties, even if it includes an official' scandal, should be disclosed immediately before it is pointed out, and it is necessary to enhance the information disclosure including the method of providing easy-to-understand information. Ministry of Health, Labour and Welfare will continue to make efforts along the aforementioned goals to enhance our abilities with the aim at being a trusted organization close to citizens' eyes.



Picture of the session concerning pension scheme (July 24)

Column

Efforts to provide information from the Ministry of Health, Labour and Welfare

The Ministry of Health, Labour and Welfare is the closest administration to citizens, and vital to implement the policies with understanding and satisfaction from citizens, and it is required to explain the policies and listen to people's voice widely.

The following introduces part of efforts that the Ministry of Health, Labour and Welfare is making, aiming at information provision from the standpoint of citizens by grasping people's needs.

(Establishment of the logo and slogan)

As part of reform of the Ministry of Health, Labour and Welfare, the ministry decided to establish a logo by asking the public for ideas, to improve the corporate governance, and to reform employees' consciousness, while getting back at the starting point of the Ministry of Health, Labour and Welfare that people expect to be. As a result of it, the logo designed by a graphic designer, Yoshiaki Hidaka in Toyonaka City, Osaka was adopted.

On the basis of the fact that the logo was decided in cooperation with the public, the Ministry established the slogan "For people, for life, for the future" as the pillar to prompt the health, labour and welfare administration expected by people.

Also the Ministry established an action guidelines for the employees to follow to realize what the slogan calls for.

⟨Delivering information through the Internet (the Website of the Ministry of Health, Labour and Welfare, etc.) ⟩

Uploading Photo Reports and Policy Reports

With the aim of letting people know of the Ministry's effort in an easier way, we opened the pages such as Photo Reports and Policy Reports on the Website in 2008.

On the Photo Reports, we introduce events related to the Ministry/the Minister of Health, Labour and Welfare together with photos. In 2009, we uploaded 128 events.

Besides, on the Policy Reports, we introduce plain explanation in turn on the policies which the Ministry of Health, Labour and Welfare implement. In 2009, we uploaded 49 explanations.

Video-sharing through YouTube, USTREAM

In February 2009, the Ministry opened a video channel in YouTube and started to deliver videos relating to the Ministry of Health, Labour and Welfare.

Besides the policy introduction by employees in charge from each department, videos show meetings in the spotlight, interviews, etc. are uploaded.

On December 26, the message from the former President Hatoyama (For those who are in need of our help at the New Year's holiday) was uploaded, and the messages from the former Minister Nagatsuma and other cabinet members were uploaded every day until January 3 in the following year.

Besides, we are broadcasting the budget screening through USTREAM since June 17, 2010 as the effort of the Internet broadcasting of open important meetings. We are striving so as for as many persons as possible to understand more deeply about the Ministry of Health, Labour and Welfare by broadcasting information through various methods.

• Collecting messages "Your voice" from the people and tabulating the messages sent to the Ministry of Health, Labour and Welfare

The Ministry of Health, Labour and Welfare has received messages from the people through visitation, phone call, mail and FAX, and since November 2009, and has released those messages together with measures at that moment because it is invaluable opportunity to improve policies of the Ministry.

Besides, we post an email form of "Your voice" on the website to hear your voice more widely.

Moreover, in April 2010 the Ministry set up "Council for Promotion of Your Voice" to share and discuss on the results of issues improved by considering the messages and issues under review in the entire administration

Action Guidelines

We will follow the next 1 to 4 guidelines to fulfill our role "Protecting people and their life for now and the future" as the slogan calls for.

- 1. We will fairly and rightly accomplish our services with morals.
- 2. We will offer administrative services according to demands from citizens and the time.
- 3. We will take actions putting ourselves in the position of citizens.
- 4. We will offer information widely with easy-to-understand words and aim at the open administration.

Besides, we will perform our duties while always keeping the following efforts in our minds and strive to build a vigor organization in order to implement the actions mentioned above.

- We will engage in our duties with pride and vocation, and accomplish our services effectively and quickly.
- We will find problems by ourselves and work all together for solution.
- We will strive to improve ourselves and elevate our aspiration.



Website of the Ministry of Health (http://www.mhlw.go.jp/), Labour and welfare: Working to update contents



Logo of the Ministry of Health, Labour and Welfare (Ministry of Health, Labour and Welfare)



Logo of the Compensation System of the Obstetric Care (Health Policy Bureau of MHLW



Logo for Measles Control (Health Service Bureau, MHLW)



Logo for Achieving Cancer Screening Rate over 50% (Health Service Bureau, MHLW)



Logo for the Companies where People Can Work until 70 (Japan Organization for Employment of the Elderly and Persons with Disabilities)



Logo for Positive Action Promotion (Nicknamed as Kirara) (Promotion Council for Active Women)



Logo for Comprehensive Promotion of Hepatitis Control (Health Service Bureau, MHIW)



Logo to Support Reemployment of Childrearing Women (Employment Security Bureau if MHLW)



Maternity Mark (Equal Employment, Children and Families Bureau of MHLW)



Logo of Japan Pension Service (Japan Pension Service)



Logo for National Campaign to Enhance Human Power of Young People (National Council to Enhance Human Power of Young People)



Next-generation Certified Logo "Kurumin(nickname)" (Equal Employment, Children and Families Bureau of MHLW)



Logo of Japan Pension Service (Japan Pension Service)



Logo of Job Card System (Job Card Kun) (Human Resources Development Bureau of MHLW)



Logo of "Healthy Parents and Children 21" (National Council to Promote Measures for a Society with a Declining Birthrate, Foundation for Children's Future)



Standard Operation Clause "S Mark" (Japan Environmental Health Industry Center

S mark represents shops, which are certified for "safety/standard/sanitation" and is introduced in 5 business sectors, including barber shops, beauty salons, laundries, noodle restaurants and general restaurants.

Registration of S Mark can be conducted at the nearest Prefectural Health Industry Guidance Center.



Logo for Assistance Dog (Dept. of Health and Welfare for Persons with Disabilities, Social Welfare and War Victims' Relief Bureau of MHLW)The logo aims to enlighten assistance dogs Your understanding and cooperation are very much appreciated when you see this logo at the shop entrance, etc. or people with an assistant dog.



International Logo for People with Disabilities (Japanese Society for Rehabilitation of Persons with Disabilities)

Global logo to clearly indicate the buildings and facilities that can be used by people with disabilities. Your understanding and cooperation for consideration toward the use by people with disabilities are very much appreciated when you see this logo at the parking space, etc.

the parking space, etc.
This logo targets "people with all kinds of disabilities", not exclusively for people with disabilities on a wheelchair.



International Logo for the Blind (National Committee of Welfare for The Blind in Japan)

Global logo for the blind established by the World Blind Union in 1984. The logo is attached to the buildings, facilities and equipment that pay attention to the safety or barrier-free for the blind. Your understanding and cooperation for consideration toward the use by the blind are very much appreciated when you see this logo.



Ear Mark (All Japan Association of Hard Hearing People) The logo to express hard

hearing
When you are indicated
this mark, your
understanding toward
the hard hearing people
and cooperation in
communication methods
with them are very much
appreciated.



Ostomate Mark (Japan Ostomy Association, Inc.) The logo represents the facilities for people with artificial anus/artificial bladder (Ostomate). Your understanding and cooperation for the ostomate-friendly toilet facilities are very much appreciated when you

ee this logo.



Heart Plus Mark (NPO Heart Plus Association)
The logo to represent disabilities inside the body (heart, respiratory function, kidney, bladder, rectum, small intestine, immune function, livery which can hardly be understood from appearance.

Your understanding and cooperation for consideration toward inner disabilities are very much appreciated when you see this logo.



Orange Ribbon
Protecting children from



Red Ribbon Symbol of understanding and support for AIDS



Green Ribbon Logo for Transplantation Medicine



Pink Ribbon Enlightenment of Early Detection of Breast Cancer



Gold Ribbon
Enlightenment of
Childhood Cancer



Red Feather Symbol of community chest