Towards Integrated Community Care System in Fukuoka-city, Japan

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Asian Aging Business Center (NPO)
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2. Municipality’s Prospects: Case of Fukuoka-city
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1. JAPANESE LONG-TERM CARE SYSTEM IN DEMOGRAPHIC TRANSITION
Japanese Age-Population Change

thousand

National Institute of Population and Social Security Research
Population & Household Projection: 2011-2060
Demographic Transition in Japan (Change of Dependency Ratio)

Status Quo of LTC in Japan

- Decentralized Social Insurance System
  Public Long-term Care Insurance System is based on national & local governmental budget, premium by aged 40-64 (Health Insurance), and premium by aged 65+ (Pension).

- De-hospitalization
  Japanese LTC is differentiated from the medical cure and the nursing care. Japanese LTC has its own domain.
## Regional Disparities of Medical/LTC Services

Yasushi Takahashi, 2015

http://www.policycouncil.jp/pdf/prop04/prop04_3_150702.pdf

<table>
<thead>
<tr>
<th>LTC Facilities</th>
<th>Acute Hospitals</th>
</tr>
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<tbody>
<tr>
<td>Poor</td>
<td></td>
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<tr>
<td>Nemuro</td>
<td></td>
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<tr>
<td>Oume</td>
<td></td>
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<tr>
<td>Tokyo Island</td>
<td></td>
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<tr>
<td>Abundant</td>
<td></td>
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</tbody>
</table>

- 1: Poor
- 2: Nemuro, Depopulated
- 3: Oume, Suburb
- 4: Tokyo Island
- 5: Tokyo Central
- 6: Fukuoka, Wide Area
- 7: Beppu, Local City
- 8: Miyoshi, Depopulated
• National Qualification of Service Providers and LTC workers
Socialization of LTC from homework to quasi-Labor market. Various service providers including private corporations and non-profit organizations.
Qualification of certified care workers.
• How can we sustain the public long-term care system in a demographic onus era.
2. MUNICIPALITY’S PROSPECTS: CASE OF FUKUOKA-CITY
Estimated LTC-recognized Elderly

Estimated LTC Budget of Fukuoka-city

The Citizen’s Will of Stable Settlement

Migration Rate in Fukuoka-city
Ageing in Place?

Status Quo of LTC in Fukuoka-city

- Residential Care Facilities 75
- Community-based Multi-Functional Small-size Facilities 24
- Community-based Day Care Services 506
- Community-based Visiting Services 723

- Population 1,500,000
- Aged 65+ 297,000
- Recognized LTC 38,000
Service Demand-Supply Balance in Fukuoka-city

Demand

- LTC needed: 57,200
- Life-Support: 41,000
- Dementia: 29,300
- Patients in Home: 3,800

Population

- Aged 75+: 284,000
- Aged 20-64: 869,000
- Fukuoka-city: 2040

Supply

- Medical Doctors: 5,600
- Nurses: 17,000
- Care Workers: 17,000

Health & LTC for the Elderly Fukuoka-city Status Quo
3. REORGANIZATION OF MEDICAL AND LONG-TERM CARE INTO THE INTEGRATED COMMUNITY CARE SYSTEM: CASE OF FUKUOKA-CITY
Integrated Community Care System

- Nation
- Prefecture
- (Wide Area)
- Municipality
- School District

- Emergency/Specialized Hospitals
- Advanced Medical Hospitals
- Rehabilitation Hospitals
- Community Hospitals
- Clinics
- Home Doctor
- Area Comprehensive Support Centre
- Home Nursing

- Long-term Care Facilities
- Community-based small-scale multi-functional Care
- Group Homes for Dementia
- In-home Care Services
- Private Houses
- Housing for the Elderly with Supportive Services

- Medical Insurance
- Long-term Care Insurance
- Dementia-Supporters
- Life-support Coordinators
- Volunteers, Neighbor & NPO
- Family Caregivers

- Medical Insurance
- Long-term Care Insurance
Aging in Place
Integrated Community Care System

Health Care

Long-term Care

Integrated Community Support Center

Aging-in-Place

Life-Support & Preventive Care
Fukuoka-city
Challenging Strategies for 2040

1. Mind Set! Citizen’s Awareness
   Orienting preventive care & health promotion
   Community involvement

2. System transform! Reconstruction of service
   providing system
   Securing “Ageing in Place!”

3. Town Design! Urban planning for hyper aged society
   Constructing age-friendly city!
   Enhancing active ageing
1. Mind Set!

- Enhancing 4 dimensions of independent citizen
- Health: Prolonging healthy life expectancy
  Preventive long-term care
- Latter Life: Self-management of health, One who should be helped well
- Income: Not only depend on pension and social security but also gain wage/income/interest.
- Decision of the end of life: Living will.
1 Mind Set!

• Sharing:  
  From “Live alone” to community involvement  
  Community café  
  Social participation
2. System Transform

• Combining between the health care and the long-term care into an Integrated community care system
  Harmonizing formal care and informal care
  Social inclusion

• Applying Information & Communication Technologies, and Robotics
  Disclosing big data
3. Town Design

• Global action: Constructing an active ageing city Fukuoka Capacity building of international care workers
4. CAPACITY BUILDING OF CARE WORKERS FOR THE INTEGRATED COMMUNITY CARE SYSTEM
## Estimated Volume of Health and Long-term Care Services in 2025

<table>
<thead>
<tr>
<th></th>
<th>2011</th>
<th>2025</th>
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<tbody>
<tr>
<td><strong>Beds in Hospitals, Average Hospitalization Period</strong></td>
<td>1,070,000 Beds 19~20 days</td>
<td>High Acute 220,000 beds 15~16 days Middle Acute 460,000 beds 9 days Low Acute 350,000 60 days</td>
</tr>
<tr>
<td><strong>Medical Doctors</strong></td>
<td>290,000</td>
<td>320,000~340,000</td>
</tr>
<tr>
<td><strong>Nurses</strong></td>
<td>1,410,000</td>
<td>1,950,000~2,050,000</td>
</tr>
<tr>
<td><strong>Clients of LTC</strong></td>
<td>4,260,000</td>
<td>6,410,000</td>
</tr>
<tr>
<td><strong>In-home Care</strong></td>
<td>3,040,000</td>
<td>4,490,000</td>
</tr>
<tr>
<td><strong>Community-based Care</strong></td>
<td>310,000</td>
<td>610,000</td>
</tr>
<tr>
<td><strong>Long-term care Facilities</strong></td>
<td>Nursing Home 480,000 old健440,000</td>
<td>特養720,000 老健590,000</td>
</tr>
<tr>
<td><strong>LTC staffs</strong></td>
<td>1,400,000</td>
<td>2,320,000~2,440,000</td>
</tr>
<tr>
<td><strong>Visiting Nurse (/day)</strong></td>
<td>280,000</td>
<td>490,000</td>
</tr>
</tbody>
</table>

*Japan Cabinet, 2011. Integrated Reform of Social Security and Tax*
Structural Transformation of Long-term Care Workforce

- Little Future Outlook
- Impenetrable Career Path
- Unclear Profession
- Mixed role

Status quo:
- Women during child-rearing
- Young age
- Middle and old age

Ideal Structure in 2015:
- Women during and after child-rearing
- Other occupations, Young age,
  The disabled, Middle and old age

Turn over

Enhancing Entry to Care Work
Improvement of Working Conditions
Quality improvement
Japanese Qualification Framework of Long-term Care Competency
International Harmonization of Qualification of LTC

日本

資格統合

韓国

無資格介護者

専門介護福祉士

介護福祉士

介護福祉士受験資格者

介護職員現任者研修

介護職員初任者研修

療養保護士

家族療養保護士

看病人

無資格介護者

技能実習生

レベル1

レベル2

レベル3

レベル4

レベル5

レベル6

レベル7
Brain Circulation

• Win-win-win through capacity development

Foreign nurse/caregiver

- Knowledge, skill and experience in caregiving
- Theories and legal framework in caregiving

Japanese care facilities

- Quality workforce
- Cross-cultural learning experience

Utilization of returnees
- Raise in standard of care
- Promoting active aging

Foreign Community Care

Reiko Ogawa, Kyushu University
International Training Centre for Long-term Care for the Elderly

- Living Lab for LTC
- Information Platform
- Developing Programs for Training of Trainers
- Comparative Researches of Long-term Care on Multi-cultural Contexts
- Evaluation Research and Consulting
- Collaboration Approaches to Ageing Communities