Development of an Area Diagnosis Tool for Promoting Home Medical Care

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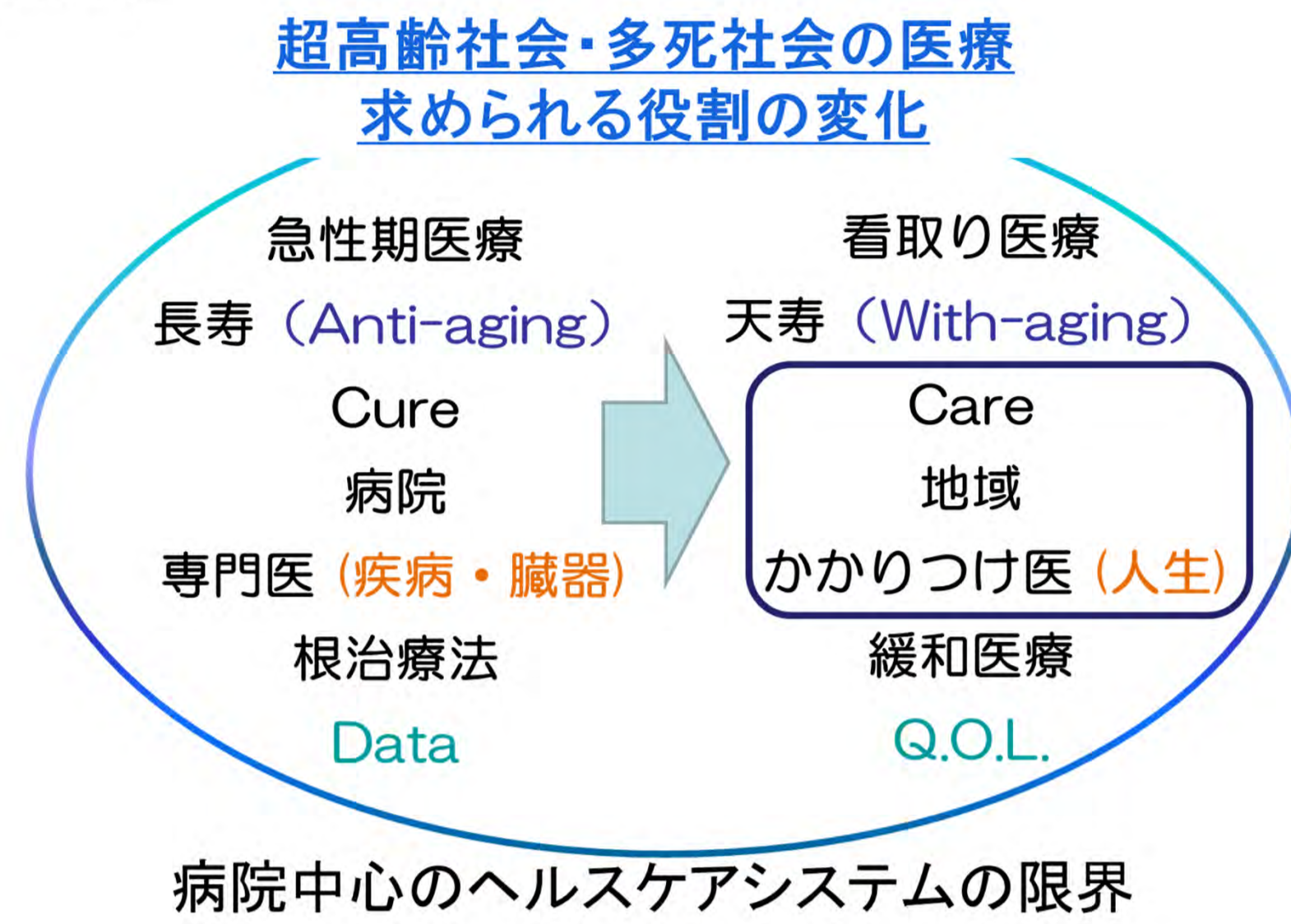
▍Project goals

Problems to be solved

Japanese society is aging at an unprecedented rate.
　⇒Expectations are running high for quality home care
　⇒There is a need to create a community and a culture
where we can live out our lives as fully as possible.

　　A life dominated by incurable disorders,
　　with too much focus on their treatment

　Figure:
　The need for medicine's paradigm shift
　from Cure to Care

超高齢社会・多死社会の医療
求められる役割の変化

急性期医療 → 看取り医療
長寿（Anti-aging）　天寿（With-aging）
Cure　　　　　　　Care
病院　　　　　　　地域
専門医（疾病・臓器）　かかりつけ医（人生）
根治療法　　　　　緩和医療
Data　　　　　　　Q.O.L.

病院中心のヘルスケアシステムの限界

R&D Target

A tool is needed to promote "home care," with communities providing reassurance.
⇒A standard diagnostic tool that promotes home care was developed, where each
municipality can evaluate the progress in home care in an interdisciplinary, inter-
professional and comprehensive manner, based on scientific analysis (targeting
cities with a population of 50,000-200,000).

Home Medical Care　　　　Care Conference

医師　介護機器事業者
ヘルパー
ケアマネ
看護師

Interdisciplinary patient-centered care team

▍Project implementation

Project overview

■ Recommendation on the definition of "home care"
　A holistic and comprehensive medical care provided at the places of living by healthcare professionals for those who cannot go to hospital, with their
　wishes and those of their families taken into account
　A medical care that takes care of patients (until the last moment) at the places of living where they feel comfortable
　An index of the status of home care → The rate of death at the places of living with care provided

■ Does the rate vary from region to region?

$$\text{Rate of death by region with care provided} = \frac{\text{Number of deaths at the places of living}}{\text{Total number of deaths}}$$

The number of deaths at home, elderly healthcare facilities, etc.
(excluding accidental deaths) divided by the total number of deaths

Based on death certificates originating from the 2011 demographic survey
(Data was provided by the Ministry of Health, Labour and Welfare via the Japan Science and
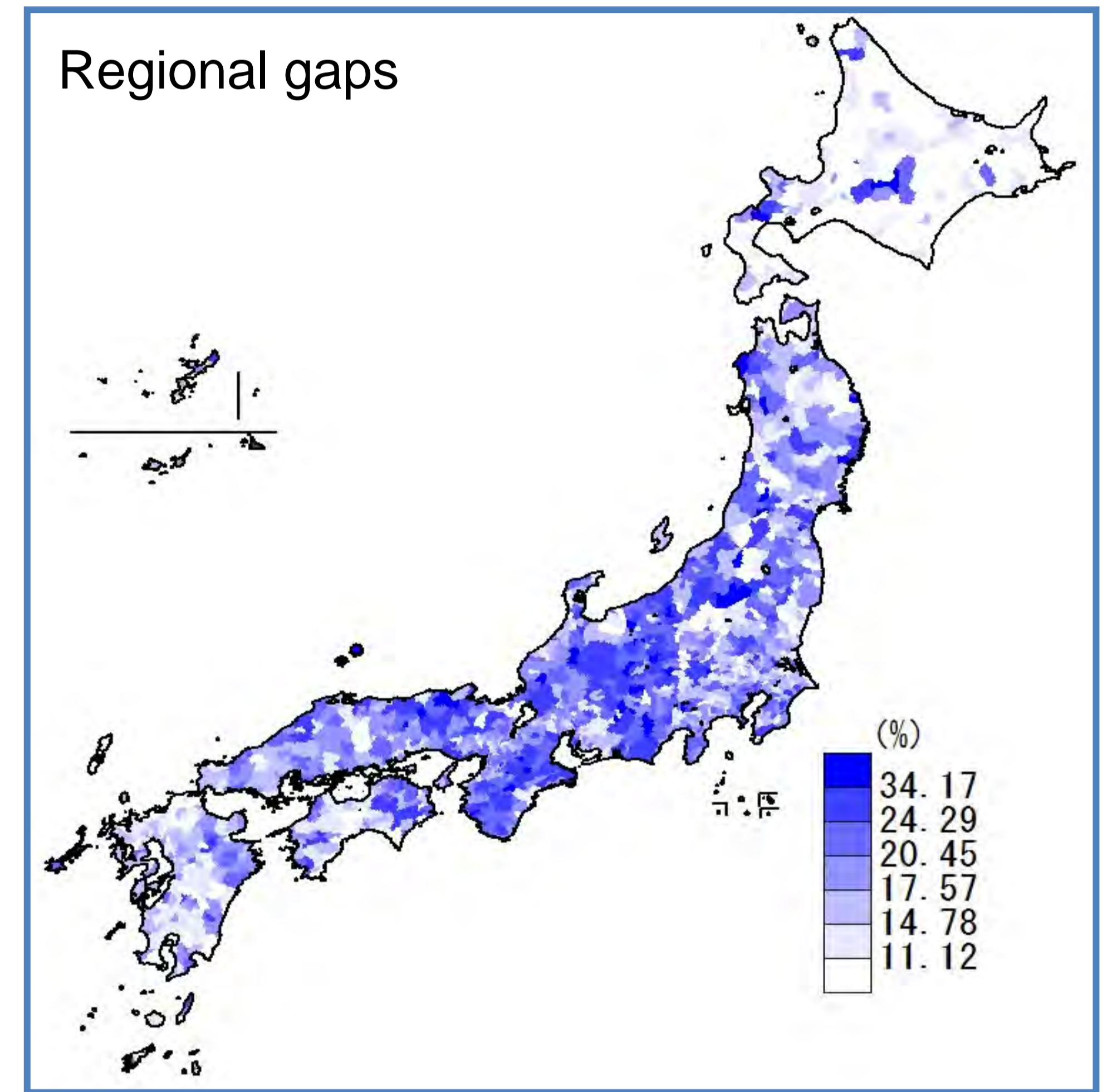Technology Agency)

■ Development of a two-tier tool (standard and advanced versions)
　Standard version: The status of regional home care is estimated from existing data.
　⇒ Each region is visualized (relatively evaluated) based on unbiased analysis of data, with the "rate of death by region
　　with care provided" as an index
　Advanced version: Perspectives to analyze each region in more detail are organized, leveraging clinicians' expertise
　and detailed qualitative data.
　⇒ The results of hearings conducted in advanced regions and knowledge obtained through home care services are
　　summarized in a qualitative manner

Regional gaps

(%)
34. 17
24. 29
20. 45
17. 57
14. 78
11. 12

▍Project achievements and future prospects
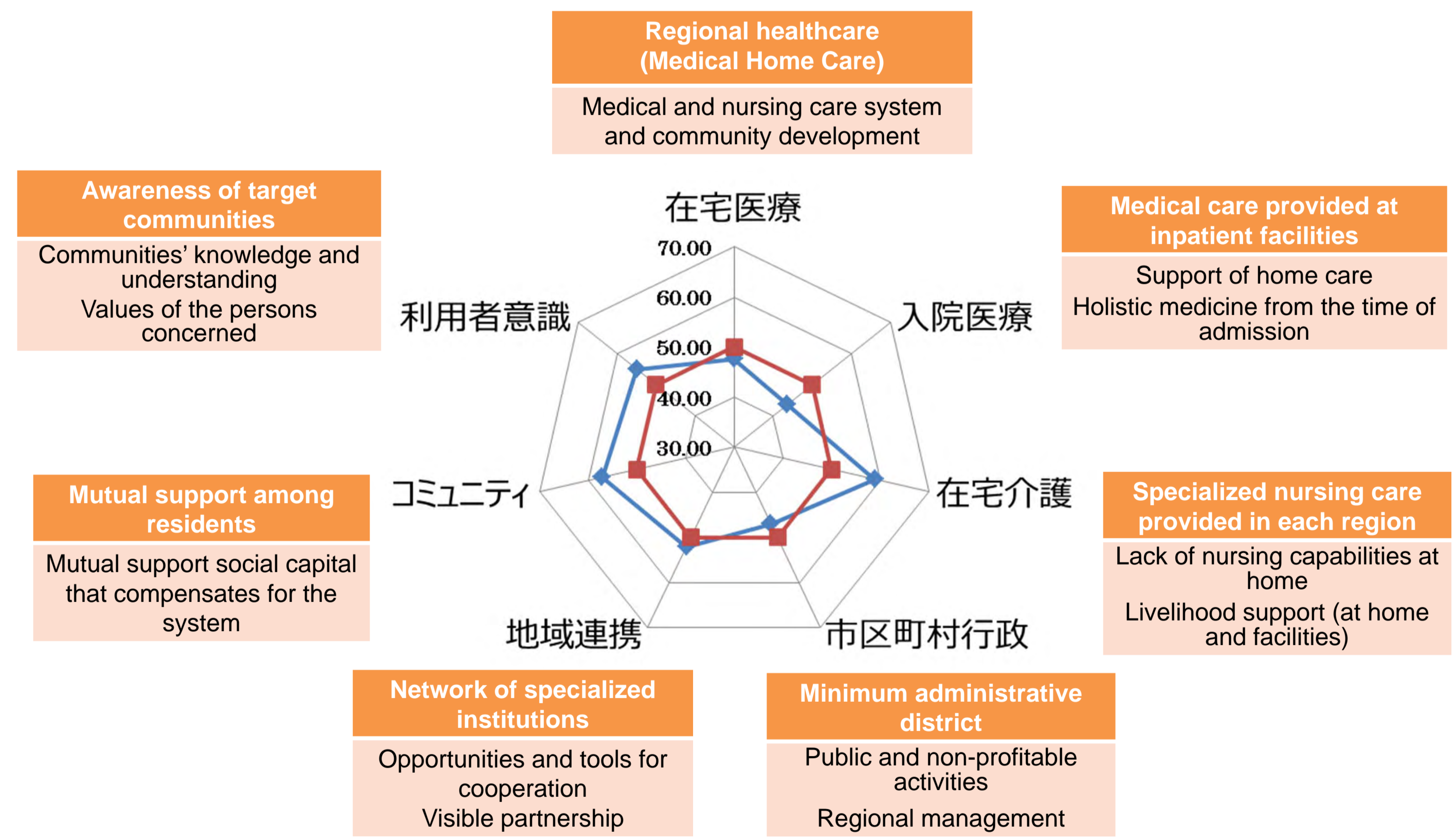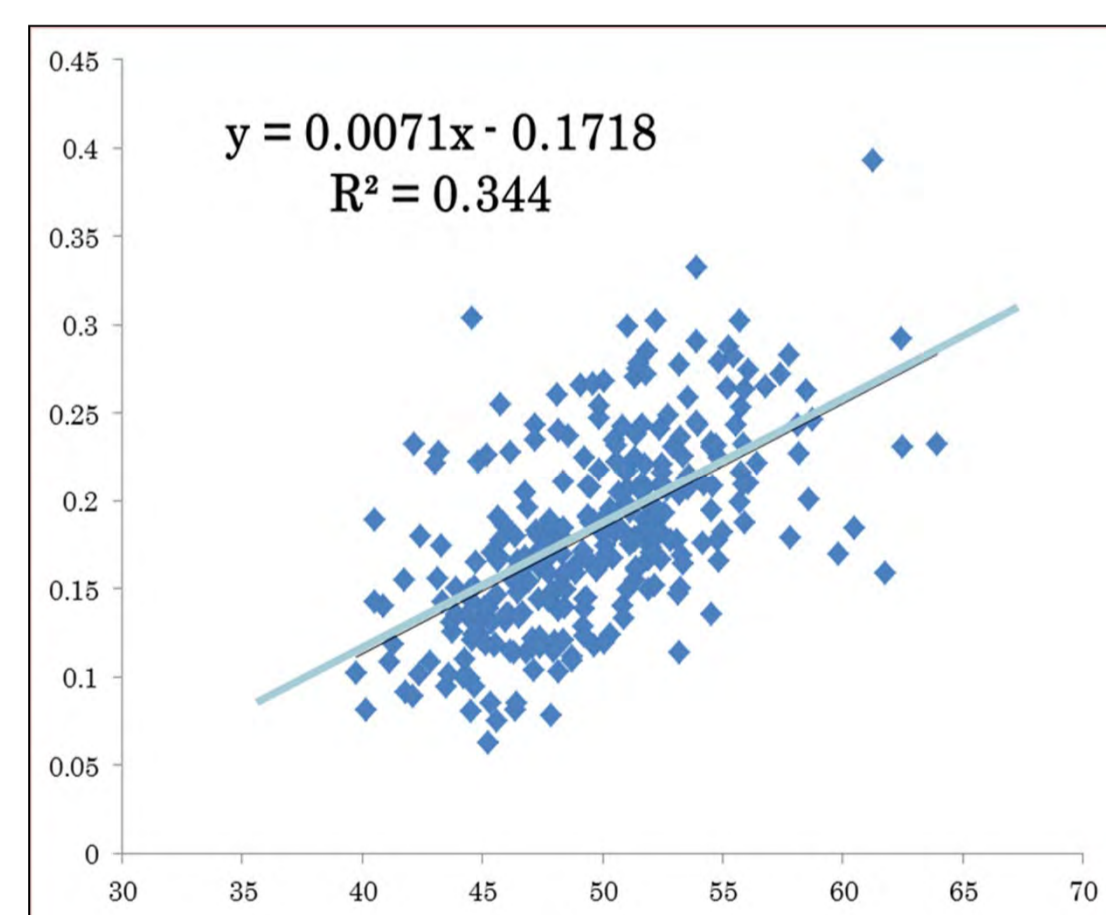
Project achievements

1. Regional diagnostic tool that promotes home care (standard and advanced versions) –
　　Refer to the final report for details.
2. Know-how in educating local communities

■ There is a need to diagnose each region from seven viewpoints including healthcare (as shown
　　in the right figure).
■ In addition to diagnosing each region, it's essential that what's obtained from the tool be shared
　　and utilized in order to promote regional cooperation. (The results of regional diagnosis ≠
　　evaluation)

【Standard version】Community Care Capacity Index CCCI)

The Community Care Capacity Index visualizes the care
capacity of communities (middle-sized cities only) based on
seven statistical analysis viewpoints. What matters is the
fact that not everything can be expressed in figures. It's
therefore important to determine what should be discussed
and implemented, focusing on the issues visualized.
(Figures are not always reliable.)

$y = 0.0071x - 0.1718$
$R^2 = 0.344$

Regional healthcare
(Medical Home Care)
Medical and nursing care system
and community development

Awareness of target
communities
Communities' knowledge and
understanding
Values of the persons
concerned

Medical care provided at
inpatient facilities
Support of home care
Holistic medicine from the time of
admission

Mutual support among
residents
Mutual support social capital
that compensates for the
system

Specialized nursing care
provided in each region
Lack of nursing capabilities at
home
Livelihood support (at home
and facilities)

Network of specialized
institutions
Opportunities and tools for
cooperation
Visible partnership

Minimum administrative
district
Public and non-profitable
activities
Regional management

在宅医療
70.00
60.00
50.00
40.00
30.00
利用者意識　　　　　　入院医療
コミュニティ　　　　　　在宅介護
地域連携　　　　　市区町村行政

←Correlation between CCCI and the rate of death by region with care
provided (determination coefficient=0.344)

Future developments and prospects

From "checking" to "using" (Seven viewpoints to create a comprehensive care system)
※ There is a need to have an opportunity to share a heartfelt emotion in order to achieve interdisciplinary,
inter-professional and inter-occupational cooperation. It takes a lot more than presenting data to change
regional care systems.
※ Objective: Examine ways to make use of regional diagnosis, focusing on the creation of organic "home care
cooperation hubs"

【Plans following the completion of the project (FY 2016)】
・Make use of the regional diagnosis viewpoints to empower various stakeholders through multi-occupational training.
・Develop a reference table with focus on creating an awareness of seeing regional care systems from the seven viewpoints.
・Upgrade "beautiful regional cooperation" to a comprehensive regional care system of "our own town," which is based on a community.

How can we create a
relationship where we
discuss and carry out issues
sympathetically?

Audience（顧客（市民））
Composer 作曲家（行政・研究者）
感動の共有
Player 演奏家（専門職）
演奏家＝チーム?
作曲家
演奏家＝チーム
観客