The first Japanese trial of the community-based integrated care system in a rural area.

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Introduction

• Japan has the largest percentage of elderly people in the world

• The Japanese government implemented a community-based integrated care system in 2012

The comprehensive care system provides the various community healthcare resources seamlessly by coordinating them
• The system originated in the 1970’s in a rural area, Mitsugi

• Its achievements and effect on national policy

• The reasons this system could arise in the rural area

• What impact does this rural-to-nationwide system change in Japan have on other countries
The age of over-65 population in Japan and Mitsugi
Problems in the 1970s

• Care was fragmented among healthcare service providers in the whole of Japan

• The number of the bedridden elderly was higher in Mitsugi than in Hiroshima prefecture, because of inadequate care at home after discharge from hospitals.

• The Mitsugi General Hospital provided only acute care.
Home-visit care services

- **1973**: Home-based long-term care service starts
- **1974**: Visiting nurse and Visiting physician services start
- **1981**: Visiting physical or occupational therapists service starts

⇒ Integration between Hospital and Home
The Health & Welfare Center

⇒Integration with Welfare, Administration and Preventive healthcare services
The Transition of the Comprehensive Health and Welfare Facilities

1981: The special nursing home and the rehabilitation centre had been constructed.

1989: The geriatric health care facility had been established.

1993: The care house had been constructed.

2002: The group home for elderly people with dementia had been established.

⇒ Integration with long-term care
Mitsugi Hospital Complex

- Mitsugi General Hospital
  - Medical care

- Comprehensive Health and Welfare Facilities
  - Long-term care in Facilities

- Health and Welfare Center
  - Public Administration
  - Preventive Healthcare
  - Home-visit care
The proportion of bedridden elderly living at home
Average healthcare costs for geriatric care

(year)

(yen/one person)

Hiroshima prefecture
Mitsugi-cho
The proportion of residents receiving health checkups

![Graph showing the proportion of residents receiving health checkups over years 2008 to 2014. The graph compares Hiroshima prefecture and Mitsugi. The proportion has increased over time, with Hiroshima prefecture showing a steady increase and Mitsugi showing a sharper rise.]
The community-based integrated care system first came into being in the rural area of Mitsugi and has become nationwide policy. Decreasing the number of bedridden people. Slowing rise of healthcare costs.
Discussion

• Reasons why this system could arise in the rural area
  Imminent problems: Higher percentage of bedridden elderly people
  Simple service structure
  Strong leadership

• Solutions to problems in an aging society may be generated in rural areas in other developed countries as well.