

# JNA News Release

Japanese Nursing Association

5-8-2 Jingu-mae, Shibuya-ku, Tokyo 150-0001, JAPAN Tel: +81-3-5778-8559 Fax: +81-3-5778-5602

<http://www.nurse.or.jp/jna/english/index.html>

## Greeting from Suga Sakamoto, President



Nine months have already passed since I took office as the President of Japanese Nursing Association. I would like to express my renewed gratitude to all who have supported JNA activities following the Great East Japan Earthquake.

Last year, I recognized the high capabilities of nurses more than ever. Local nurses in the affected areas took powerful efforts to fulfill their responsibilities, putting in a number of ideas to tackle interrupted essential utilities and scarce

relief goods. Disaster relief nurses gathered from all over Japan, and started off courageously to the affected areas from in front of the JNA building. I myself as a nurse, take great pride in all such nurses. The number of registered disaster relief nurses increased from 4,800 in 2010 to 6,300 in 2011. Participants in disaster nursing seminars also increased to 4,000 in FY2011. This reflects the increased awareness among nurses for disaster preparedness.

In 2012, JNA seeks to take additional effort toward improvement in the working environment for nurses, achieving certain results while continuing with the support activities. We will also issue a warning to Japan's exhausted health care system, and promote the establishment of the credentialing system for specified ability of nurses, as a legal framework for expanded roles of nurses.

JNA believes that it is essential to identify and satisfy frontline needs with "ant's eyes" and "bird's eyes". It is also our goal to further strengthen collaboration between nurses and other health professionals, and to proactively refer to trends in other countries, thereby pursuing the establishment of a better health service system and proposing policies that contribute to people's improved satisfaction. ■

## Promotion of Multifunctional Long-Term Care in a Small Group Home Based on Visiting Nursing

Japan is a super-aged society with the population aging rate of 23.1% (as of October 1, 2010). A large number of citizens hope to continue their life in their familiar communities. There are also an increasing number of home care patients who have

a high requirement for medical treatment, due to shortened length of hospital stay. There is a limitation of the service provision based on the premise of family's nursing power, because changing family structures have led to increasing

single-person households of seniors and families where senior takes care of another senior. This is why an even greater collaboration is required between health care and long-term care services.

JNA have proposed, to the Ministry of Health, Labour and Welfare, a service that combines visiting nursing and multifunctional long-term care in a small group home, targeted at providing integrated nursing and long-term care to seniors who have a high requirement for medical treatment. This combined service will be implemented in this April. JNA has undertaken pilot projects toward the establishment of this system, and has verified concrete results of the service.

It has been confirmed that this combined service is capable of providing a flexible mix of differing services, in accordance with the user's conditions. Also the system is able to respond the users who have just left the hospital or who suffer from unstable conditions. As a particular benefit of this system, it has been clarified that effective and efficient care becomes possible through sharing of information and care policies between nurses and long-term care workers.

We offer supports and provide information on the establishing and operating know-how, so that visiting nursing stations across Japan can proactively start the combined service. ■

### Multifunctional long-term care in a small group home

This nursing service provides seniors mainly with "day service" at a nursing facility, combined with "visiting service" to their home and "short stay" at a facility, as appropriate and in accordance with the senior's conditions and requests, thus enabling the senior, who has a medium to high requirement for long term care, to continue life at home. Before this combined service was established, the "day service", "visiting service" and "short stay" services were respectively provided by different facilities. This new system enables the same staff to provide differing care services on a continuous basis, and is evaluated highly particularly for its capability to provide flexible care to seniors with dementia, whose conditions vary day after day.



## Formulation of Training Guidelines for Newly Graduated Midwives

The environment that surrounds midwives in Japan has become increasingly complicated and demanding, in accordance with the declining birthrate and increasing high-risk pregnancies and deliveries, introduction of mixed service by more than one departments in maternity wards,

insufficiency in obstetricians, and a changing service provisional system of perinatal care. As one of the JNA's main policies and projects in FY2011, upgrading safe and secure environment for pregnancy, delivery and child rearing by active use of midwives, JNA has promoted In-Hospital Midwife-led

Care System at hospitals and clinics and the establishment of an education and training system based on career paths and ladders for midwives. At present, formulation of Training Guidelines for Newly Graduated Midwives is in progress to be

completed by the end of FY2011, as a more practical and specific version of the existing Training Guidelines for Newly Graduated Nurses, specialized for new midwives with clarifying the desirable status and required competency of midwives. ■

### Training Guidelines for Newly Graduated Nurses

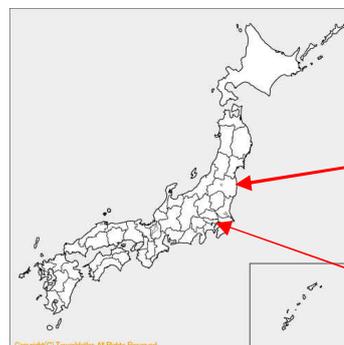
Following the revision of the Act on Public Health Nurses, Midwives and Nurses and other related laws in 2009, nurses were required to take best efforts to receive clinical training, starting April 2010. To prepare for this, the Ministry of Health, Labour and Welfare formulated the Training Guidelines for Newly Graduated Nurses in December 2009. Subsequently, a necessity was pointed out to formulate guidelines regarding training for midwives, targeted at providing them with basic practical competency. Thus targeted levels of midwifery skills and other related provisions were added to the Training Guidelines for Newly Graduated Nurses in February 2010.

## CEO Benton from ICN and Executive Officer Ogawa from JNA visited an affected area by the Great East Japan Earthquake

David Benton, CEO of ICN, who visited Japan at the end of January, together with Shinobu Ogawa, Executive Officer of JNA, visited Iwaki City, Fukushima Prefecture, one of the areas affected by the Great East Japan Earthquake. They were received by Kyoko Takahashi, President of Fukushima Nursing Association, and other members, and visited the tsunami-hit areas and a local hospital. ■



Mr. Benton with Ms. Takahashi, president of Fukushima Nursing Association at Tsunami hit Hisanohama area



Fukushima

Tokyo

## Nursing in Japan

### Q What activities do visiting nurses undertake?

Visiting nursing is a service covered partly by medical insurance and partly by long-term care insurance, to provide care by nurses at the home of a sick or disabled person, so that the person can lead a life based on the person's own and/or the person's family's requests. The scope of service ranges from babies to seniors, and support is also provided to their supporting families.

Major services of visiting nurses include the following; check of temperature, pulse, blood pressure etc.; observation of health conditions; treatment guidance; maintaining the person's body clean; nutrition management; management of medical device; respiratory care; palliative care; nursing guidance.

Visiting nurses do not need to have a special qualification in addition to their nursing license, though a written order must be issued by the primary care physician of user before a visiting nursing service is provided.

The visiting nursing service is mainly provided by visiting nursing stations and by hospitals and clinics. The stations are offices specialized in visiting nursing, which are designated by governors of respective prefectures. Nurses are authorized to open a visiting nursing station. As of March 2011, there are approximately 5,700 stations across Japan.

#### Standards for opening a visiting nursing station

Administration		One dedicated full-time public health nurse or nurse is required (may have another position concurrently, as long as there is no administrative problem).
Staff	Nurses	Public health nurses, nurses, or assistant nurses At least 2.5 members in terms of full-time equivalents must be employed, one of which should be a full-time member.
	Physical therapists Occupational therapists	As appropriate

## News Topics in Japan

### Credentialing System for Specified Ability of Nurses

On December 8, the proposed outline of the "credentialing system for specified ability of nurses" was approved in most parts at the Medical Treatment Subcommittee, Social Security Council, Ministry of Health, Labour and Welfare. Thus our efforts toward the establishment of a specified nurse system (tentative name) have achieved a step forward toward credentialing of specified ability.

At the time of the first anniversary of the Great East Japan Earthquake, JNA placed an ad in the newspaper on March 11th as follows. <http://www.nurse.or.jp/jna/english/index.html>