

# JNA News Release

Japanese Nursing Association

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## FY 2013 Annual General Convention

Japanese Nursing Association held its annual general convention for the fiscal year 2013 on June 4th and 5th. The convention was attended by a total of 5,937 representatives and JNA members. During the convention, reports on priority policies and main projects and the work plans for the current FY were presented, and attracted lively discussions. The Board members have been elected at the convention, and the incumbent President, Suga Sakamoto, was re-elected for a second term.

Shinobu Ogawa, former Executive Officer in charge of international affairs, retired from the office at the end of the term, and Ikumi Nakaita is taking over as Executive Officer for international affairs. ■



Ikumi Nakaita  
Executive Officer in charge of  
International Affairs

## JNA Organizational Restructuring

JNA adopted a new organizational structure as of July 1st. The healthcare environment has been changing dramatically, creating various challenges for our healthcare services in recent years. Through this restructuring of the divisions and respective services and duties within our organization, JNA intends to strengthen our capacity to formulate policies and to meet those challenges in a speedy and flexible fashion. Under the new organizational structure, JNA will implement quality and fruitful work to create the work environment in which nurses are able to continue working, to improve the quality of nursing, and to develop and expand the areas of nursing, so that JNA's missions can be achieved. ■

## Survey of Hospital Nurses Salary

In February and March 2013, JNA conducted a survey of the salaries for hospital nurses. This was the first large-scale survey focusing on the salary of nurses.

The mean monthly salary (for January 2013) of a nurse (fulltime, permanent employee, working in a non-managerial role, mean age of 36.1 years) was ¥254,583 (about \$2,594). The total income before tax and insurance deductions, including various

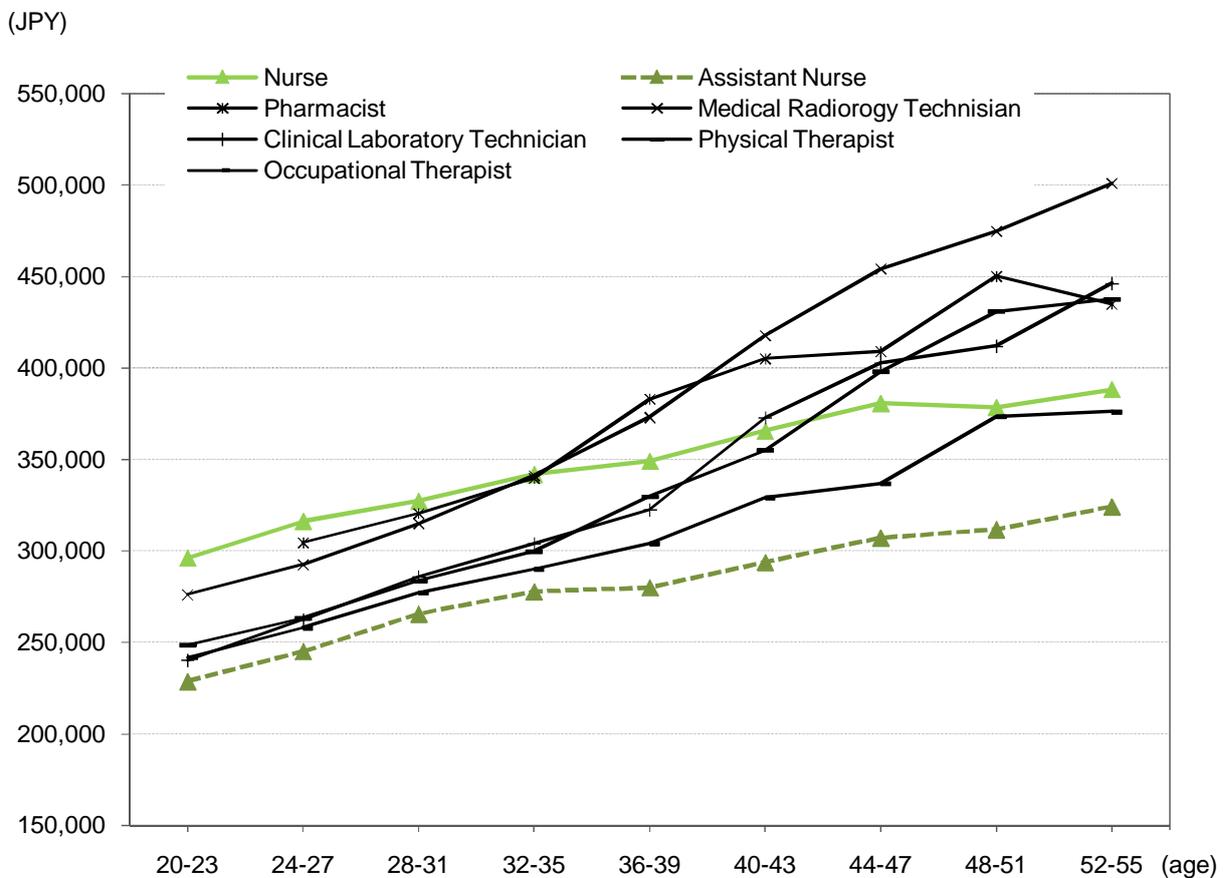
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allowances such as night shift allowance was ¥352,157 (about \$3,588). The mean rate of basic monthly salary increase, although increasing with age, remained 145% at 54 years of age compared to the group between 20 and 24 years of age.

Note, the slow increase in nurses' salaries is also

observed when using the data from the "Survey on Salary by Occupation 2012" published by National Personnel Authority to compare the total monthly income including night shift and overtime allowances with other healthcare professions. ■



Comparison of nurses' total monthly income with other professions

1 JPY = 0.0102 US\$ as of August 14

### Efforts to Strengthen Functions of Nursing at Long-Term Care Facilities

Japan is faced with a rapidly aging society that has not been seen anywhere else in the world. At long-term care facilities, one of the options among the places where aged persons can spend their lives, the medical care needs of residents have been increasing. Long-term care facilities with fewer nursing staff do not only need specialized knowledge and skills, but also the management skills with wider perspective. However, there are not many training opportunities. Even if trainings are available, it rarely offers systematic programs. It is difficult to obtain the required competency in a step by step manner under the current circumstances. To strengthen the functions of nurses working at long-term care facilities, JNA developed a "Systematic Training Program for Nurses at Long-Term Care Facilities" in 2012.

In 2013, after review by a special committee and pilot projects, the “Guideline for Nursing Practice at Long-Term Care Facilities” has been developed. This guidebook provides a specific and manageable practical nursing guideline for the nurses working at long-term care facilities to deliver effective care while collaborating with other professions. This book focuses on i) special characteristics of elderly people, ii) the role of nursing and nursing practice, iii) the development of a system of nursing practice at a long-term care facility, and iv) the establishment of a system of learning and improving specialized knowledge and skills, and is structured to be used effectively by practicing nurses on a daily basis. ■

## Guideline for Developing Disaster Response Manual in Birthing Facilities

As a part of our actions to utilize the lessons learned from the Great East Japan Earthquake of March 11, 2011, we have published a “Guideline for Developing Disaster Response Manual in Birthing Facilities.”

A study conducted by JNA found that only a few facilities had established a manual with instructions on what to do if a disaster struck during delivery. There were also differences in level of statements even if the manuals included such scenarios. This result prompted us to publish the Guideline providing ideas for each birth facility to use when developing its own manual, as a lesson from the Great East Japan Earthquake. The lesson learned from the Earthquake is that preparedness should be sought for anytime, and routinely when there’s no attack of disaster. Even if a facility is equipped with a disaster response manual, staff cannot necessarily perform those actions at the time of a disaster. It has become clear from hearing reports from the disaster-affected areas that having had a

manual AND routine drills enabled them to make decisions and to take appropriate actions when the disaster struck.

This Guideline aims for wide range of interventions covering up to three months after the disaster occurs including raising awareness of midwives to enable delivery under any circumstances such as lifelines have been severed, and preparation to protect pregnant and parturient women and infant, who are the vulnerable groups under disaster circumstances. The guideline has three parts facilitating the development of i) a manual for everyday preparedness, ii) a manual for the required actions immediately following a disaster, and, iii) a manual for the required actions for mid- and long-term support. We hope that this “Development Guideline” will be used at each facility to develop a manual suitable to each facility’s respective geographical character, roles and functions and that drills will be conducted according to the developed manual. ■

## News Topics in Japan

### System of notification by persons holding a nursing qualification

On June 20th, a proposal, the “Creation of a system of notification by persons holding a nursing qualification to the prefectural nurse center,” as a part of a revision of the Act on Assurance of Work Forces of Nurses and Other Medical Experts, was proposed to the Healthcare Committee of the Social Welfare Council, Ministry of Health, Labour and Welfare. Related discussions are expected to continue.

## Nursing in Japan

### Q How are nurses' salaries determined in Japan?

A nurse's salary is determined based on his/her age, number of years of continued employment, educational background, job description and roles, according to the salary system at each facility.

- National hospitals employ a salary system stipulated by the Salary Scale for Nurses as National Employees, while other publicly funded hospitals use a salary system stipulated by their respective local governments.
- Other hospital/facilities have their own salary system. This situation creates gaps in standard salaries among regions as well as facilities.

When comparing the composition of the total income earned by nurses with that of other healthcare professions, there is a visible trend that the addition of the allowance such as night shift and over-time makes up a larger portion, while the basics salary constitutes a smaller portion.

## News Topics in Japan

### Florence Nightingale Medal

On May 12th, Dr. Setsuko Hisatsune, a former president of Japanese Nursing Association and Ms. Aiko Kin, Deputy Director and Director of Nursing of Japanese Red Cross Ishinomaki Hospital, were among the 44th group of recipients of Florence Nightingale Medals. Dr. Hisatsune's long-term involvement in nursing education and her actions and achievements in disaster relief for the disaster-affected areas in the aftermath of the Great Hanshin Awaji Earthquake and the Great East Japan Earthquake were recognized. Furthermore, as a former president of JNA, she was instrumental in leading the partial revisions of the "Act on Public Health Nurses, Midwives and Nurses" and the "Act on Assurance of Work Forces of Nurses and Other Medical Experts," which requires to make effort in implementation of a clinical training program for newly graduated nurses, and contributed to the development of nursing education. Ms. Kin, as a Deputy Director and Director of Nursing at a one of the hospital in devastated area, devotedly worked for the aid activities and played a key role in the aftermath of the Great East Japan Earthquake. And also her achievements of practical education and drill for disasters in normal times were recognized.