My term as the President of JNA will come to an end in June. When I first assumed this position, I was confronted with the question how nurses should address Japan’s super-aging society, and felt the need to propose a vision. In 2015, we issued a document named “Future Vision of Nursing: Nurses’ Endeavour toward 2025 – Nursing Supports and Sustains Human Life, Living and Dignity,” which describes our plans toward 2025, and also clarifies the direction of the activities to achieve this Vision. The Government is restructuring the social security system in preparation for the year 2025, when the first baby-boomer generation will be 75 years or older. In the “Future Vision of Nursing,” we have clearly indicated the role of nurses at this time of social transformation that nurses can manage care integration through providing care from a broad perspective with the viewpoint of “healthcare” and “living” which nurses possess. In this way, we have been successful in raising public awareness about our policies to expand our activities settings from hospital to community and home-based care.

I am also glad to see that many matters I had been dreaming about, even before becoming the President, are steadily taking shape with the support of JNA and its members: (1) the promotion of work-life balance, (2) a system to evaluate and improve the quality of nursing, and (3) a system to evaluate the competency of individual nurses. For the rest of my term, I commit myself to promote enhancement of basic nursing education, such as extending the period to 4 years. If we look ahead and give due consideration to those who will have to confront the as-yet-unknown or unimaginable challenges after 10 to 20 years’ time, it is clear that “education” needs to be addressed right now. As the role expansion of nurses are required, nurses must be equipped not only with knowledge and skills but also with the ability to make their own decisions and judgements, and to act responsibly. I hope that more nurses will grow into leaders who can initiate changes, and as the President, I will continue to make efforts to moving forward.
The Wage System of Nurses Employed by Hospitals

In June 2016, JNA published the JNA’s proposal for “the wage system of nurses employed by hospitals”. When JNA conducted a survey of the wage of nurses for the first time in 2012, various issues came to light e.g., slow wage increase with age, and dissatisfaction with wage are important reasons for leaving job. JNA believes that it is necessary to promote a fair and acceptable wage and treatment. We think the wage system should support nurses, who contribute to people’ health, to provide highly valued care as professionals, so that nurses can work comfortably throughout their entire career and realize the work style meeting their needs.

The first proposal is “the wage system model” (see Table 1 on the next page). It proposes to categorize nurses according to their competencies and roles (multi-track personnel promotion system), namely, “professional group,” “administration/management group,” and “highly skilled professional group.” Each group will also be sub-divided into several steps according to the level of competency and expertise (grade system). The mechanism to set the wage/treatment by category and step is the core concept of the proposed “wage system model.” The steps can be formulated based on the clinical ladder for nurses.

The second proposal is “the wage/treatment to secure and utilize diverse human resources.” We propose an additional point reward system based on the working arrangements and limitations of working hours.

These proposals are made to encourage nurses to shape and enhance their careers as professionals and to support them to continue working with motivation and fulfillment. These proposals also aims to help hospitals ensure the retention of nurses, promote the securement and utilization of diverse human resources, and provide high quality nursing care.

Although it is not easy to change the wage system, JNA hopes that hospitals will look into all possibilities and move forward in ways that match their own situation.

Frog for change

JNA started Kaeru Project for Nurses in 2009 to improve working conditions for nurses. The symbol of the project is a frog, which called “Kaeru” in Japanese. “Kaeru” also has several meaning including to change, to return, to exchange and to hatch.
A nurse is certified as a CNA upon accumulating a certain amount of experience after obtaining a national qualification for nurses, and then passing the credentialing examination given by JNA after completing a master's program at a graduate school or an education program for certification. There are three levels in the CNA curriculum which are the first level, the second level and the third level.

### Table 1. The wage system model

<table>
<thead>
<tr>
<th>Class</th>
<th>Step</th>
<th>Level of job skill</th>
<th>Example of level of nurse career development ladder</th>
<th>Clinical ladder of competencies for midwifery practice</th>
<th>Job title</th>
<th>Level of curriculum for Certified Nurse Administrator</th>
</tr>
</thead>
<tbody>
<tr>
<td>Class 6</td>
<td>G5</td>
<td>Expert</td>
<td>Level V (Class to be determined according to contribution to organization)</td>
<td>Level III, IV (Class to be determined by renewal, and contribution to organization through post/role)</td>
<td>M2</td>
<td>Head nurse</td>
</tr>
<tr>
<td>Class 5</td>
<td>G4</td>
<td>Mid-level</td>
<td>Level IV Minimum of 3 years required</td>
<td>Level III Minimum of 2 years required</td>
<td>M3</td>
<td>Vice Director of Nursing</td>
</tr>
<tr>
<td>Class 4</td>
<td>G3</td>
<td>Mid-level</td>
<td>Level III Minimum of 2 years required</td>
<td>Level II Minimum of 2 years required</td>
<td>M4</td>
<td>Director of Nursing</td>
</tr>
<tr>
<td>Class 3</td>
<td>G2</td>
<td>Mid-level</td>
<td>Level II Minimum of 2 years required</td>
<td>Level I Minimum of 1 years required</td>
<td>M5</td>
<td>Post/role (The following qualifications are prerequisites, and classes are determined depending on contributions of posts/roles in specialty)</td>
</tr>
<tr>
<td>Class 2</td>
<td>G1</td>
<td>New Graduate</td>
<td>Level I Minimum of 1 years required</td>
<td>Level new graduate</td>
<td>S1</td>
<td>Nurse who completed trainings for nurses to perform specific medical interventions</td>
</tr>
</tbody>
</table>

1) Certified Nurse Administrator (CAN): A nurse is certified as a CNA upon accumulating a certain amount of experience after obtaining a national qualification for nurses, and then passing the credentialing examination given by JNA after completing a master’s program at a graduate school or an education program for certification. There are three levels in the CNA curriculum which are the first level, the second level and the third level.
The 4th China-Japan-Korea (CJK) Nursing Conference

The 4th CJK Nursing Conference was held in Beijing, China, from 12 to 14 November 2016. The conference is a joint initiative of the Chinese Nursing Association (CNA), Korean Nurses Association (KNA), and JNA. Five years have passed since the previous conference, and this time it was organized by CNA and co-hosted by KNA and JNA. Over 1,300 nurses gathered under the theme “Enhancing professional competency of nurses through promoting academic development.” A total of 83 nurses attended from Japan.

Keynote lectures were given by the Presidents of CNA, JNA, KNA as well the President of the International Council of Nurses (ICN). Dr. Sakamoto, the President of JNA, made a presentation on our efforts to achieve the “Future Vision of Nursing: Nurses’ Endeavour toward 2025” and introduced our endeavors to expand basic nursing education, enhance nursing career development, strengthen nursing competencies, and expand the roles of nurses, to improve the quality of nursing care.

In the JNA session, consisting of our activities, presentations were given to explain the Clinical Ladder for Nurses (JNA version), our efforts toward dementia nursing (including the development of the Guidebook for Dementia Care), and JNA’s proposal regarding the wages of nurses working in hospitals. The hall was full, reflecting the level of interest in our activities.

News Topics in Japan

New fields of Certified Nurse Specialists (CNS)

November 24, 2016: The board of JNA approved the addition of “Genetics Nursing” and “Disaster Nursing”; therefore, there are currently 13 specialized fields for the qualification of Certified Nurse Specialist.

For more information on Certified Nurse Specialist, please refer to our English website.

http://www.nurse.or.jp/jna/english/nursing/education.html