The Canon Institute for Global Studies Seminar

# What should Japan learn from Health Reforms in the world?

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Key words that Japan should learn

Integrated Care

- **(2)** Organization Culture
- ③ Resiliency
- **④** Patient Information Sharing
- **5** Population Health





## Difference between Collaboration and Integration

Japan	Collaboration	The government seeks to establish a regional comprehensive care system by collaborating among hospitals, independent MDs, long-term care facilities and welfare facilities in each healthcare area. However, as long as they are an independent organization, it is difficult to form consensus on management decisions due to economic conflict. Even if an agreement can not be made, each of them will not be troubled for a while, so decision making to optimize the regional care delivery system will be delayed. As a result, even national and public hospitals in the same area compete each other and repeat the redundant overinvestment.
Australia US Hong Kong Canada UK•••••	Integration	A large-scale entity that fulfills the platform function of patient information sharing and function sharing is built by integration where the management decision-making is unified. Australia established Local Hospital Networks in 2011 Reform. In US, there are over 500 Integrated Healthcare Networks. Hong Kong set up the Hospital Authority to enhance the integration of public hospitals.



# **Resiliency of Health System**

	Resiliency	
Japan	Low	Public health insurance benefits are very generous without gatekeeping patients flow and verifying cost effectiveness and Health Technology Assessment. The ratio of public expenditures to medical expenses was 38.9% in 2015. The public expenditures are financed by issuing deficit bonds. It will be difficult to continue financing the healthcare system if the government is no longer to issue bonds at the current low rate.
Australia Germany France Singapore US UK ••••	High	The finance structure of healthcare is a layered structure by utilizing private health insurance. They have adopted some scheme to control patients' consultation behaviors. There are certain restrictions on public health insurance benefits.



# **Patient Information Sharing**

	The government recommends building a medical information collaboration network for each healthcare market area, which is typically by prefecture.
Japan	The Ministry of Health and Welfare advertises the AJISAI NET in Nagasaki prefecture as the best model. Although 240 healthcare organizations (hospitals and clinics) are participating in it, 206 of them see patient health record on other hospitals, but do not disclose information on their patients. Because of its low convenience, users are only 5.5% of residents in Nagasaki prefecture even after 14 years from the start of operation.
	The government declares that it will build PHR's framework by 2020, but it is unlikely to be realized
Australia Hong Kong	Large-scale safety net organizations are playing a platform function for patient information sharing.
Taiwan	Taiwan and Estonia have a system of information sharing throughout the
Estonia	country.
US	Australia has succeeded in introducing the PHR program.
UK ••••	



# **Population Health**

Japan	As it was not recognized that Population Health is an important social science in promoting medical reform, such experts are short. There is no university that teaches Population Health. Medical treatment fees for healthcare institutions are uniformly applied nationally as determined by the government. However, medical expenses per capita have wide regional differences. Therefore, the government has amended the law to let prefectures govern the finance and investment of health system and introduce a medical treatment fee system for each prefecture. However, the lack of experts seems to be a bottleneck
Australia Canada US	There are universities that have established departments for Population Health, and Population Health is developing as social science. Large-scale regional comprehensive care entities located throughout the country, which are Integrated Healthcare Network in US and Local Hospital Networks in Australia, are practicing Population Health in various ways.



## Topics in Australia's Health Reform ① Local Hospital Network



Administrator National Health Funding Pool

Enter hospital, network or state

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#### Local hospital network (LHN) directory

This page lists local hospital networks by state and territory.

Click on the name of a local hospital network to view hospitals and health care providers within that local hospital network, and to access monthly reports for that local hospital network.

A local hospital network (LHN) is an organisation that provides public hospital services in accordance with the National Health Reform Agreement. A local hospital network can contain one or more hospitals, and is usually defined as a business group, geographical area or community. Every Australian public hospital is part of a local hospital network.

NSW | VIC | QLD | WA | SA | TAS | ACT | NT

#### New South Wales

Albury NSW Local Health District Central Coast Local Health District Contracted Services Northern NSW Local Health District Northern Sydney Local Health District South Eastern Sydney Local Health District



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#### An example of Local Hospital Network

# Monash Health

Employees 16,000 Annual revenues 1,668 million AU\$



More than 40 sites including: Six public hospitals Monash Medical Centre (640 beds) Moorabbin Hospital (147 beds) Dandenong Hospital (573 beds) Casey Hospital (273 beds) Kingston Centre (213 beds) Cranbourne Centre (same-day acute and sub-acute) One private hospital

Jessie McPherson Private Hospital 11 major community health sites Hospital in The Home (140 bed virtual acute ward)

Six aged care facilities (249 beds) Eight mental health facilities



# Topics in Australia's Health Reform (2) Personal Health Record My Health Record Statistics – at 25 March 2018

Published 23 March 2018

Over 5.5 million people have a My Health Record, with an over 18,000 new records being created every week.

Over 17.5 million prescription and dispense records have been uploaded.

Over 10,830 healthcare providers are connected, including GPs, hospitals, pharmacies, aged care residential services, allied health.

Over 4.5 million clinical documents uploaded.

## Dashboard display of My Health Record statistics

This page contains My Health Record statistics to 25 March 2018





## Topics in Australia's Health Reform ③ Population Health





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#### Centre for Population Health Research

Cancer Epidemiology	>
Health Economics and Social Policy	>
Nutritional and Genetic Epidemiology	>
Patient Safety Research Group	>
Public Health	>
Psychosocial Oncology Research Group	>

### **Centre for Population Health Research**

#### Population Health Research to inform Policy and Practice



The Centre for Population Health Research (CPHR) is a newly created University of South Australia flagship research concentration in Population Health located at the South Australian Health and Medical Research Institute, incorporating a group of leading scientists in epidemiology, public health and biostatistics. CPHR focuses not only in making scientific discoveries, but also in influencing public health policies and health care practices. With extensive local and international collaborations, the CPHR is positioned at the cutting edge of research discovery and method development in epidemiology and population health.



### Topics in Australia's Health Reform (4)

## Nurse System

Principal role	Number	Enrolled (per cent)	Average age (years)	Aged 50 and over (per cent)	Average weekly hours
Clinician <sup>(b)</sup>	277,667	17.6	43.9	37.5	33.2
Administrator	14,797	7.8	50.2	57.4	38.5
Teacher/educator	9,847	5.7	47.9	46.4	34.5
Researcher	2,700	4.9	47.9	49.3	33.6
Other	2,093	21.8	49.7	56.9	32.6
Total	307,104	16.6	44.4	39.0	33.5

(Note) In addition to above 307,104, Enrolled Nurses (60,000 in 2012) are working.

#### <Question>

#### Minimum nurse- to -patient staffing ratios regulation in Australia?



# Education System for Nurse Practitioner ?



#### How much does a Nurse Practitioner make in Australia?

The average salary for a Nurse Practitioner is \$112,235 per year in Australia. Salary estimates are based on 340 salaries submitted anonymously to Indeed by Nurse Practitioner employees, users, and collected from past and present job advertisements on Indeed in the past 36 months.

