



Trends associated with Home Care Supporting Clinics (HCSCs) in Japan

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ABSTRACT

Aim: HCSCs were introduced in Japan in April 2006 with the aim of playing a central role in providing end-of-life care at home. However, it is unclear how the HCSCs are operated because statistical data regarding their activities have not been disclosed to the Japanese public. The purpose of this study was to describe the trends associated with the HCSC activity in Tokyo, Japan. **Methods:** We submitted an application to the relevant government ministry to disclose the annual activity reports from 2008 to 2010 of the HCSCs located in Tokyo. Reports from each HCSC contained information on the number of patients, the number of deceased patients, their place of death and the number of home visits by physicians and nurses. **Results:** The number of HCSC activity reports for each year was 1166 (2008), 1209 (2009) and 1246 (2010), while the total number of patients for each year was 67,765 (2008), 67,094 (2009) and 83,486 (2010). Patients who died at home each year under the care of HCSCs was 4431 (2008), 4786 (2009) and 5234 (2010). It is of note that in 2010 about 87% of patients were cared by HCSCs that cared for >50 patients a year and as many as 26.9% of patients who died at home utilized clinics that cared for >50 deceased patients a year. **Conclusion:** The advent of HCSCs caring yearly for >50 patients and deceased patients has led to a shift in the location in which patients receive end-of-life care.

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1. Introduction

Given the extremely rapid aging of society and the inevitable marked increase in the number of people dying (Ministry of Health, Labour, and Welfare, 2009), developing a sustainable home-based medical care system is a critical political task for the Japanese government (Matsuda and Yamamoto, 2001; Ida et al., 2002).

In Japan, HCSCs were introduced by the revised Medical Care Act of 1 April 2006 with the expectation that they would play a central role in providing home-based end-of-life care (Japan Network of Home Care Supporting Clinics). To be certified, an HCSC has to provide home-based care services 24 h a day in cooperation with hospitals, home-visit nursing stations and care managers, and they should ensure emergency hospital admission if necessary. In addition, the HCSC is required to submit an annual activity report to the Japanese Ministry of Health, Labor, and Welfare mentioning items such as the number of patients, the number of deceased patients, their place of death (hospital, home, facility) and the number and type of activities performed, including physician home visits, physician home visits on a regular basis, home-visit nursing and emergency home-visit nursing.

The number of HCSCs in Japan increased from 8595 in 1 May 2006 to 11,775 in 1 December 2011. Those in the Tokyo prefecture accounted for 10.4% of all HCSCs in Japan (Byoin Shinryosho Jouhou) in the very limited region amounting to only 0.57% of the whole country resulting in quite a dense distribution of those clinics (0.56 vs 0.03 clinics/km²).

	Japan	Tokyo
Area	377,914 km ²	2188 km ²
Population	127,360,000 persons	12,991,242 persons
Population density	337 persons/km ²	5938 persons/km ²
Number of HCSCs	11,775 clinics	1222 clinics

Tokyo Metropolitan Government: Statistics of Tokyo, Available at: <http://www.toukei.metro.tokyo.jp/> (In Japanese).

However, it remains unclear whether the increased number of HCSCs has resulted in any increase in the number of patients who receive home-based care because statistical data from the activity reports of the HCSCs have not been disclosed to the public. Also, because any clinic which met the requirement set under the Japanese Ministry of Health, Labor, and Welfare, could have acquired a certification of an HCSC, there is a possibility that the number of patients who received end-of-life care at home by those clinics was much less than had been expected (Akiyama et al., 2011).

Therefore, we submitted an application to the Japanese Ministry of Health, Labor, and Welfare for the disclosure of the activity reports of HCSCs in Tokyo; we obtained reports from 3 consecutive years (2008–2010). The purpose of this study was to

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describe trends in the HCSC activities in Tokyo. The following research questions were addressed:

- How many HCSCs were operational in Tokyo?
- How many patients received home-based care provided by HCSCs in Tokyo, and of these, how many died at home?

2. Methods

Data were derived from the activity reports of the HCSCs from 2008 to 2010 (2010: from 1 July 2009 to 30 June 2010; 2009: 1 July 2008 to 30 June 2009; 2008: 1 July 2007 to 30 June 2008), which were collected by submitting an application to the Japanese Ministry of Health, Labor, and Welfare. The data included the number of patients, the number of deceased patients, their place of death (hospital, home, facility) and the activities performed by HCSCs, including physician home visits, physician home visits on a regular basis, home-visit nursing and emergency home-visit nursing. The names and addresses of the HCSCs were not disclosed by striking out from the report form in order to protect personal information.

To examine the relationship between home visit provided by HCSC and place of death in 2010, we conducted stepwise multiple

linear regression analysis. Statistical analysis was performed using SPSS 12.0J for Windows. The level of significance was set at $p < 0.05$.

3. Results

Table 1 summarizes the activities performed by the HCSCs in Tokyo. The number of HCSC activity reports filed in Tokyo each year was as follows: 1166 (2008), 1209 (2009) and 1246 (2010). Out of these HCSCs, 73 (2008), 110 (2009) and 110 HCSCs (2010) had no patients for each year. The number of HCSCs taking care of >50 patients was 300 (2008), 299 (2009) and 350 (2010). The total number of patients was 67,765 (2008), 67,094 (2009) and 83,486 (2010). The number of patients under the care of HCSCs taking care of >50 patients was 57,010 (2008), 57,540 (2009) and 72,810 (2010). The total number of deceased patients under the care of HCSCs was 10,649 (2008), 11,472 (2009) and 12,568 (2010), and the number of patients who died at home was 4431 (2008), 4786 (2009) and 5234 (2010).

Table 2 summarizes the total number of deceased patients who died at home under the care of HCSCs in Tokyo. Of these HCSCs, 43.2% (2008), 42.5% (2009) and 43.3% (2010) had no patients who

Table 1
HCSC activity in Tokyo.

		2008 ^a		2009 ^b		2010 ^c	
Number of HCSCs in Tokyo		1166		1209		1246	
Number of patients/year	0	73	(6.3)	110	(9.1)	110	(8.8)
	1–10	432	(37.0)	382	(31.6)	445	(35.7)
	11–50	348	(29.8)	320	(26.5)	340	(27.3)
	>50	300	(25.7)	299	(24.7)	350	(28.1)
	Unclear	13	(1.1)	98	(8.1)	1	(0.1)
Total number of patients/year	67,765		67,094		83,486		
HCSCs caring for 1–10 patients		1903	(2.8)	1600	(2.4)	1870	(2.3)
11–50 patients		8852	(13.1)	7954	(11.8)	8806	(10.5)
>50 patients		57,010	(84.1)	57,540	(85.8)	72,810	(87.2)
Total number of deceased patients/year		10,649		11,472		12,568	
Place of death	Hospital	5183	(48.7)	5433	(47.4)	5949	(47.3)
	Home	4431	(41.6)	4786	(41.7)	5234	(41.7)
	Facility	980	(9.2)	1251	(10.9)	1385	(11.0)
	Unclear	55	(0.5)	0	0.0	0	0.0
Total number of home visit/3 month ^d		4,28,157		4,40,094		4,76,953	
Physician home visit ^e		33,697	(7.9)	34,770	(7.9)	40,131	(8.4)
Physician home visit on a regular basis ^f		3,30,533	(77.1)	3,46,414	(78.7)	3,82,948	(80.3)
Home-visit nursing		62,938	(14.6)	57,025	(13.0)	52,143	(10.9)
Emergency home-visit nursing		1987	(0.4)	2024	(0.4)	1731	(0.4)

^a 2008: 1 July 2007 to 30 June 2008.

^b 2009: 1 July 2008 to 30 June 2009.

^c 2010: 1 July 2009 to 30 June 2010.

^d Total number of home visit from 1 April to 30 June of the year.

^e Physician home visit is a physician house call services provided by home visit physician.

^f Physician home visit on a regular basis is scheduled during regularly scheduled work hours.

Table 2
Number of patients who died at home under the care of the HCSCs.

		2008 ^c		2009 ^d		2010 ^e	
Number of HCSCs without any deceased patients either at home or in other medical facilities		504	(43.2) ^a	514	(42.5)	540	(43.3)
Number of HCSCs with 1–10 patients who died at home		546	(46.8) ^a	574	(47.5)	586	(47.0)
Total number of deceased patients		1641	(37.0) ^b	1708	(35.7)	1764	(33.7)
Number of HCSCs with 11–50 patients who died at home		100	(8.6) ^a	103	(8.5)	105	(8.4)
Total number of deceased patients		1937	(43.7) ^b	2009	(42.0)	2060	(39.4)
Number of HCSCs with >50 patients who died at home		10	(0.9) ^a	11	(0.9)	15	(1.2)
Total number of deceased patients		853	(19.3) ^b	1069	(22.3)	1410	(26.9)

^a (%): Percentage relative to all HCSCs.

^b (%): Percentage relative to the total deceased patients under the care of HCSCs.

^c 2008: 1 July 2007 to 30 June 2008.

^d 2009: 1 July 2008 to 30 June 2009.

^e 2010: 1 July 2009 to 30 June 2010.

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