Topic-Setting Program to Advance Cutting-Edge Humanities and Social Sciences Research

(Responding to Real Society)

Progress Report

(Summary of Final Report)

[Standard Evaluating Comprehensive Plan for Medical Care and Long-Term Care
--- from two viewpoints of utilizing home]

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Research Period: FY 2015 - FY 2018

1. Basic information of research project

Research Area	Building an anxiety-free care system in a shrinking society; Establishing a lifeline infrastructure		
Project Title	Standard Evaluating Comprehensive Plan for Medical Care and Long-Term Care from two viewpoints of utilizing home		
Institution	Hokkaido University		
Core-Researcher	Tomoyuki KATO		
(Name, Academic Unit & Position)	(Graduate School of Law, Professor)		
Project Period	FY 2015 - FY 2018		
	FY 2015 JPY 2,560,000		
Appropriations Plan	FY 2016 JPY 4,160,000		
(¥)	FY 2017 JPY 2,760,000		
	FY 2018 JPY 1,750,000		

2. Purpose of research

This research is titled "Standard Evaluating Comprehensive Plan for Medical Care and Long-Term Care --- from two viewpoints of utilizing home", it is inspired by the following background, problems and needs. The final goal of this research is to propose evaluation criteria and evaluation methods for a comprehensive medical and nursing care plan, which best fits the regional background of Hokkaido.

Background

Hokkaido is said to be an epitome of Japanese declining population problem. One of the reasons that made it the epitome is its population. Just like Tokyo, the tendency for the population of Hokkaido to be concentrated in Sapporo City has become stronger and stronger. On the one hand, decentralized living in an area with a large population accelerates the weakening of living infrastructure. On the other hand, the city and its living infrastructure has not adapted to the increasing needs surrounding medical and care.

So far, social security organizations have spent much of their funds on programs designed for the elderly. The outline/abstract of this research program also follows this conventional direction. However, even if one were to focus on the local community, as long as one pays too much attention to the short-term perspective, one can only stop at general measures for the country. Here, as mentioned in the "city, people, and work creative strategies", it is important to set policy issues with a long-term perspective of human development. Therefore, this research focuses on local problems of the pediatric medical care in Hokkaido, and aims at proposing policies for the construction of a better care system and the development of a local infrastructure.

Seventy percent of Japanese social security budget (110 trillion yen) are used for the elderly. It cannot be argued that the elderly care policy will continue to be an important Japanese policy in the future. However, after 2040, when the baby boom generation shifts to being considered elderly, one could beg the question: what will become of our country and society? This problem is barely discussed. This is a very important issue that should be discussed promptly and seriously, although it is a problem that will happen far into the future. The consequences of a rapidly aging society are the current reality of Japan, but one could say that failure to prepare measures to prevent the decline in birth-rate in advance, created the current situation.

On the other hand, with the aim of establishing a regional care system, a regional medical care comprehensive insurance and funds system will be introduced based on the conventional subsidy system, which will allocate funds appropriately and fairly to the projects necessary for the region. It is a system based on the "Law for Promotion of Comprehensive Securing of Medical Care and Nursing Care in local communities (Heisei one Act No.64)". This system can reflect the views and opinions of whom it may concern, and it has been called a very fair and transparent procedure for allocation. However, in practice, there are many questions that need to be discussed, such as what the range is of the people concerned and how to reflect their opinions. Especially the attitude of the prefectural government who is in charge of making the plans, is being questioned.

In addition to the stable economic growth and the situation of the population decline, the social needs for rational allocation of resources does not increase or decrease. However, there is a problem concerning rational allocation of financial and human resources.

Significance of this research

Pediatric home care, the core issue of this research, is not a problem that the parenting generation will face only at the time of parenting. This is a problem which is also closely related to pregnancy and childbirth. This problem is also not limited to the medical care for intractable diseases. Pediatric home care must be based on a system where children can receive flexible medical care at their homes (local and regional environment). It also connects to a demand for the enhancement of regional comprehensive power which refers to the regional infrastructure services.

Although the regional medical care comprehensive plan that makes use of regional characteristics is similar to French regional health system that strongly promotes measures to control medical expenses, it seems that there is not any article about this from a planned administration view that has been introduced in Japan. In addition, "Urban Planning Centered Around Hospitals" (Topic-Setting Program to Advance Cutting-Edge Humanities and Social Sciences Research by the Japan Society for the Promotion of Science), represented by Ito Yukiko (Associate Professor, Faculty of Education, Tokyo Gakugei University) as a representative. The promotion project "Responding to Real Society" aims to provide the basis for decision making for the optimal placement of hospitals, and will propose the proper placement and town planning of hospitals in 14 areas. Ito Yukiko's research might be similar to this research, because it also focuses on the hospital's medical organization and regional characteristics. But this research is focused in Hokkaido, and aims to do a deeper analysis based on pediatric home care, which will help to figure out a regional medical care comprehensive plan, which sets it apart from Ito Yukiko's research mentioned above. In addition, "Developing a Culture of Care in a Mutually Supporting Local Community: A Clinical Philosophy Project", represented by Hamauzu Shinji (Professor, Graduate School of Letters, Osaka University), is also similar to this research, because in program researchers and expertise work together in welfare and education fields. But this research has a practical and real goals for providing evaluation criteria for planned administration.

The final goal of this research is to propose evaluation criteria and methods for a comprehensive medical care plan, in order to contribute to the formation of the socio-economic foundation of a sustainable community. However, it should be noted here that the regional vitalization policy will be divided into "urgent measures" and "medium and long-term measures" that require medium and long-term structural reform.

Nonetheless, this research focuses on the recommendation for "medium and long-term measures".

3. Outline of research (Including study member)

This research has two steps with three goals as follows:

Steps

In order to observe regional medical planning and medical welfare care planning in prefectures and municipalities, this research will focus on paediatric care (it is also the starting point of this research). In particular, in order to clarify the actual conditions and to identify the problem of the operation of social security systems such as medical systems and social welfare systems, Dr. Dobata, who has led the reform of children's home care in Hokkaido with a focus on child home care, keep working with Mr. Ito who served as the representative of the sickness group council. As the first step, they organized the patients with intractable disease in Hokkaido, figured out the legal issues from the real problems, such as what problems the service providers are actually facing, what problems the service consumers are dealing with, and what measures could be taken for solving all those problems. The second step follows plans (prefectural plans and municipal plans) for regional medical care and long-term care insurance formulated based on the "Community Medical Care Comprehensive Acquisition Act" through the filter called the actual operation situation of the pediatric home care in advance. We performed verification from examining of three viewpoints. First, dose the purpose of the project conform to the project outline. The second is the rationality of the method, which focuses on whether it is a rational means or a means for achieving business. The third is the perspective of fund adequacy to consider whether the allocated funds secure a sufficient amount of funds to achieve their intended purpose.

Research objectives

By establishing an evaluation standard and evaluation method for a regional medical care comprehensive plan, it should in fact be referred to as a total of regional comprehensive care system, including analysis of children's home medical care based on a regional comprehensive care system (Objective ①). For discussing the problems in detail such as: because it is in Hokkaido, what kind of system should we use or what kind of compact city can support this system? We will look at insights of multiple perspectives through ideas and opinions exchanged with stakeholders online (Objective ②). Finally, we will propose political recommendations based on all of above (Research Goal ③).

The research objective ① aims to "visualize" the prefectural plan. Fund business based on community medicine care comprehensive synthesis plan is composed of 3 medical treatments, and 2 care relations, 5 divisions in total. The specific business categories are: 1 Business related to the maintenance of facilities and equipment of medical institutions for achieving regional medical designs, 2 business related to medical provision in homes, etc. It is business about securing of business, 5 care workers. With regard to such fund projects, we will clarify the annual change in the composition ratio of the total cost for medical and nursing care-related components and the cost composition ratio for the medical-related component 3 parts, etc. In addition to this, we will identify the contents of business related to child care by prefecture and provide materials for comparison.

The main method of research objective 2 is interview. The main purpose of this interview is to investigate the actual situation of children's home care treatment. Regarding this, in order to locate the real problem in regional medicine, in addition to the investigation in each areas as follows, we collected information from institution as follows, and have exchanged opinions with Hokkaido Government Health and Welfare Department Regional Medical Division, Disabled Person Health and Welfare Division, Hokkaido Teine Special Support School, Yamagata Prefectural University of Health Sciences, Mie University Hospital.

In addition, child home care efforts in the area closely reflect the regional characteristics of the area. Therefore, from the viewpoint of regional characteristics, this analysis can be roughly divided into three types. First of all, we would like to look at the current state of child care in the United Kingdom and Ireland as a reference to study Japanese policy trends. Secondly, in order to clarify the regional characteristics of Hokkaido, we have organized many interviews in Kawanishi-cho in Yamagata, Naha-shi, Haebaru-cho and Miyakojima-shi in Okinawa, Tsu-shi and Kuwana-shi in Mie, as supplementary lines for comparative analysis. Thirdly, we got to know how the diversity of regional characteristics in Hokkaido by interview at many cities of Hokkaido, such as, Kushiro-shi, Higashikawa-cho, Esashi-cho, Yakumo-cho, Memuro-cho, etc.

Research objective 3 shows the final goal of this research.

The following provides an overview of the significance of the Comprehensive Security Act, which is the main subject of this study, and the significance of the Prefectural Plan and the Comprehensive Security Fund.

Significance of Medical Care Comprehensive Security Promotion Law

The significance of this law can be summed up by the following two points.

One of the significance is "building an efficient and high quality medical care delivery system" and "building a regional comprehensive care system", these two work like two wheels of a car. In short, it is a policy that clearly shows the link between medical care and nursing care. It can be said that the emphasis on cooperation suggests that cooperation between the two divisions is difficult. However, according to the comprehensive care system, the Comprehensive Security Act states, In accordance with the local circumstances, elderly people can, as much as possible, conduct independent daily life according to their abilities in the areas they are used to living in. It is defined as "a system that comprehensively secures medical care, long-term care prevention, and housing and independent daily life support" (Article 4 paragraph 4 of Medical Care Comprehensive Security Promotion Law). Thus, to comprehensively support daily life more effectively, it has been required to ensure consistency between the medical plan and the long-term care insurance plan.

The second goal is that it aims to ensure consistency among plans for medical care and long-term care insurance. Prefectures should plan a medical care plan with consistency and prefectural long-term care insurance business support plan in making a prefectural plan (Ibid, Article 3 paragraph 2, 5, Article 4 paragraph 3). In this regard, although the medical care provision systems are a prefecture run system, mainly the municipalities have made plans for the care provision system. However, from now on, medical plans including municipal medical care plans, municipal care insurance business plans and prefectures will be

integrated so that the establishment of the medical care delivery system and the construction of the regional comprehensive care system can be integrated, which will also share the same objective with the first significance. Consistency of the Long-term Care Insurance Project Support Plan is required.

Prefectural plan

1) Overview of the plan

The prefectural plan largely defines the following three items. The first is the setting of a comprehensive area for securing medical care and nursing care, a goal for comprehensive securing of medical care and care in the area, and a planning period. The second is the five points necessary to achieve this goal. The first point is related to the maintenance of facilities or equipment of medical institutions for the achievement of regional medical design. The second is medical services at home etc. Its contents, the amount of expenses on business offer and the business maintenance. For example, three public long-term care facilities, securing 4 medical workers and 5 care workers. Third is the necessity of comprehensive securing of medical care and nursing care in other areas (the law, Ibid, Article 4.1, paragraph 2).

Among these, a fund can be set up to cover all or parts of the expenses required for the points listed in the second item (also referred to as prefectural businesses). This fund is called a securing fund. And when setting up a securing fund, the country bears two-thirds of the necessary funds for allotting to its financial resources (Ibid, Article 6).

2) The process of making the prefectural plan, submission of securing fund

How is the grant amount of the funds determined? Fundamentally the government determines the amount of funds to be allocated to prefectures based on surveys and interviews with prefectures.

The budget of 2015 proposals for the securing fund, the medical schedule was as follows. Of these, the items with numbers ① to ⑦ at the beginning are the main items in the prefectural planning and securing fund's decision and the delivery decision process.

2014 Dec.:	①The government request the prefectures to investigate the work (including their content, scale, etc.)		
2015 Feb.:	Health, Labor and Labor Relations Director General Heads' Meeting		
Mar.:	② The prefecture submitted the report about their project to the national government		
After the budget is established:	Heads' Meeting of National medical affairs administration		
	The Presentation of grant summary of the fund		
	③ The Prefectures submitted a review of business volume to the national government		
May:	The Prefectures submit their plans		
	④ Hearing about their work of the project		
June:	⑤ The government asked the Prefectures to make sure their fund		
July:	The Prefectures submit their plans		
	Grant application		
	⑦ Grant decision		

Significance

About the significance of Healthcare Securing Fund, I would like to point out five points.

The first is the perpetuation of the fund. The Security Fund is to establish a permanent financial support system to promote the reform of the provision of medical and nursing care services by utilizing the increased sales tax as resources. In other words, the regional medicine reproduction fund, the predecessor of the securing fund, is based on the regional medicine reproduction plan, formulated and issued from 2009, to support the prefectural project. However, the project was unstable because it was taken as a budget measure. For this reason, the Healthcare Securing Fund will be introduced from 2014.

The second is the carry over possibility. It is closely related to the perpetuation of the fund, but unlike the subsidy, it is not necessary to use it in a single year. As a result, it is possible to flexibly respond to the project implementation over multiple fiscal years, and flexible execution according to the financial demand of each fiscal year. Thus, while prefectural governments are required to operate from a medium- and long-term perspectives, the government are required to respect the enforcement policy of prefectural funds.

The third is the meaning of ensuring fairness and transparency. Funds will be financed by the increase in consumption tax, so projects to be implemented by allocating funds need to be clearly returned to local residents as medical care services in the area, and the decision process in the business decision process transparency and information disclosure must be ensured. In addition, it is necessary to secure fairness among business entities, that is, to allocate business expenses justly, regardless of business entities.

The fourth is the requirement of post ex-post evaluations. The prefectural plan should clarify the ex-post evaluation on the business conducted in the previous year under the PDCA cycle. In relation to the fairness and transparency mentioned on the second significance above, regarding the various businesses implemented in the previous year, after clarifying the business content, the target, achievement, based on the plan, we will publish the evaluation about the efficiency of the project. According to this, it is possible to verify the contents of the specifically developed business.

The fifth is the division of medical treatment fee and care fee. Because medical treatment fees and care fees are set as compensation for medical treatment and nursing care services are based on uniform scores and unit settings throughout the country, there are aspects in which it is difficult to respond according to the local circumstances.

On the other hand, the projects implemented by the fund can be designed to solve problems in the region. In particular, the project related to the maintenance of facilities or equipment at medical institutions and business related to the maintenance of nursing care facilities compensate for the initial cost for hospital construction and equipment introduction. Finally, although it is a hand-raising method by facility establishments, the introduction of a security fund can be evaluated as the first attempt to introduce an initial cost systematically.

Research members

Mission	Name	Institution/their position	Subject
Research representative	Tomoyuki Kato	Professor, Graduate School of Law, Hokkaido University	In charge of 【Research summary】, operation of groups, construction of human network, legal problems analysis of plan evaluation, setting of evaluation framework

Group leader (specialist)	Tomoyuki Dobata	Chief director of Medical Corporation Tousei-kai, director of Shogai Iryo Clinic Sapporo	【Group of pediatric medical】 In charge of presenting and analyzing the issues of online service issues, clarifying the allocation of budget and evaluation criteria
General member (specialist)	Tateo Ito	Representative of NPO Nanbyo Support Network Hokkaido	【Group of pediatric medical】 In charge of presenting and analyzing the issues of online service issues, clarifying the allocation of budget and evaluation criteria
Group leader	Jun Nishimura	Professor, Kanagawa University of Human Services	【Group of care management and family policy 】 Analysis framework for planning administration theory, creation and analysis of policy priority indicators
General member	Wataru Chida	Lecturer, Kushiro Public University	【Group of care management and family policy】 Survey and analysis of comparative reference systems, selection and invitation of specialists in regional policies, etc.

4. Research results and outcomes produced

Results

According to the method written in "3. Outline of this research", firstly, here we want to introduce three viewpoints of prefectural plan which belong to the second step, including the rationality of the funds and their methods, some of the research results on relevance. Secondly, overview the understanding on ex-post evaluation which appears to be rare in general administrative plans. Finally, we will outline the policy recommendations from our research results.

From 2014 to 2017, a total of 63 medical programs were developed in Hokkaido plan.

Here, we will examine them along with the three points of view shown above.

The first is the issue of relevance. It can also be referred to as the lack of transparency regarding the description of the base amount. In the yearly plan, target areas and business goals are described for each business. Among them, the total cost of the project is divided into total cost, fund (country, Hokkaido) and other fields. In addition, there are total project cost column and other (fund appropriation amount) column in the ex post report. However, the information on the public business plan is limited, and there are cases where the notation method and the amount of money are not flat, and the explanation regarding it is also insufficient.

The lack of explanation may be unavoidable due to the nature of the prefectural plan or funds for flexible responses of this project. In addition, not all businesses require business execution as planned. However, the lack of explanation for large-scale projects does not meet the institutional purpose or the purpose of the fund, which is required to be more transparent due to the nature of the fund that is financed by the increased consumption tax.

The second is relevance and means rationality related to the business content. With regards to changes in project content, it is possible, and permitted, to add new items to the project content or reduce some of the items from the request of a plan that corresponds to the local circumstances. However, since public expenses are used for business execution, the necessity and rationality for carrying out the business is required.

In addition, when a certain project is added to the previous project items, there are cases where business beyond the boundaries of the business category is added. If medical treatment and nursing care are divided into 3 divisions and medical care into 2 divisions to ensure the transparency of business execution after clarifying the expenses, according to the nature of the business it can be said that the classification into different business categories is an important significance for fund setting. From these things, it should be kept in mind that it is against the purpose of the fund's system to easily link multiple expenses as a related business.

In addition, due to the characteristics of their business, it is necessary to try to cope with medical treatment fees, and there are some hospitals that are not appropriate for the fund. For example, under the background of the shortage of doctors, and regional imbalance, in order to keep the local emergency care and perinatal care systems, we should try our best to make sure that the doctors and obstetricians providing medical treatment and emergency work in severe work conditions, could be paid. There is some company called securing support of emergency work doctor, obstetrics doctor.

I fully agree that it is necessary to improve the treatment of doctors under severe working conditions, but it is an issue that should be basically solved in the medical service salary system, and it is a little bit strange to us the fund to solve the problems. In addition, doctors' office work assistant support project is aim to "promote placement of doctor office work assistant to medical institutions", which can't be treated as medical treatment fee. Same question with the emergency work doctors and obstetrics doctors, it's quite strange to deal with this problem by fund.

Ex-post evaluation

Among the planned administrations that have become increasingly important in recent years, there are few plans that introduce ex-post evaluation from the front. Ex-post evaluation is also valuable in securing information transparency. However, the form for ex-post evaluation has also been changed in conjunction with the fact that the form for prefectural planning has changed significantly since fiscal 2016.

In relation to the output indicator being described in the prefectural plan, the ex-post evaluation describes the initial target value and the achieved value for the output indicator, and, regarding the effectiveness and efficiency of the project, the outcome index value within one year, the effectiveness of two businesses, and the efficiency of three businesses will be described.

There are two things that need to be discussed. One is the meaning of the outcome index value, and the other is the method of describing the effectiveness and efficiency of the business.

First, regarding the outcome index value.

The facility equipment maintenance business of 1 medical institution in 2016 plan had five projects. Regarding these projects, only one project was able to observe the outcome index value within one year after the end of the project in the ex-post evaluation in the fiscal plan of 2017, and the remaining four projects are hospital report of 2016 and It is said that the outcome index value could not be observed because the Ministry of Labor's vital statistics (2016) has not been released. The same applies to the projects implemented in fiscal 2015. Therefore, for these projects, outcome index values cannot be observed unless the implementation timing of statistics changes. If such evaluation continues in the future, the significance of setting this item will disappear.

The reason for questioning the significance of the outcome index value is as follows. As for the project on securing of 4 medical workers implemented in fiscal 2016, 31 projects have been implemented. 12 of these projects were able to observe outcome index values based on one data. According to the data, among the population of 100,000, nursing staff has increased from 1324.3 to 1376.8 (2014- 2016). Individually and abstractly, the number of nursing staff has increased, therefore we can say that it is the result of project implementation. But what should be asked here is how much each of the 12 projects contributed to the increase in nursing staff? The information and explanation is apparently insufficient.

The second issue is about the efficiency of the business.

Although it is anticipated that this is a matter of expression, it is expected that it will be an evaluation that one has learned a part of the contents of the business at the planning stage, or whether one plans to continue the business descriptions that are considered to be evaluations. In a sense, I think that the responses that were prepared before the execution of the business are noticeable and that the significance of the ex-post evaluation is lost.

For example, in the patient information sharing network construction project, although network construction in secondary medical area units was not seen, network construction in municipal units was increased by 1 municipality, and participation of 10 medical institutions in existing networks was increased. "The system has been developed so that patients can receive medical care and nursing care without interruption." "The system has been developed to continue medical treatment using computerized medical record information". "It can be evaluated that participation in the networks of related organizations such as nursing homes has been promoted." These can be argued that they are nothing more than factual expressions, but we can say that this is only an increase in 1 municipality and 10 medical institutions, despite the projects that have invested 100 million yen since 2014. In this sense, the evaluation basis of the efficiency of this project is insufficient.

Conclusions

From the above, the research results of this research can be summarized as follows.

First, regarding prefectural plans, I believe that "visualization" analysis has achieved great results. It has succeeded in highlighting the features of the business in the prefecture. In addition, critical opinion on "ex-post evaluation" which started from the 2016 plan also revealed that the attitude toward the plan of the prefecture was clarified. As a result of extending the research period of this research by half a year, it became possible to take enough time for analysis for the 2017 plan, and as a result evaluation criteria based on the three-year change over time and the ex post evaluation for the business plan I was able to obtain an evaluation method.

Next, I was able to recognize the importance of the element of "education" for pediatric home care. Since the regional medical care comprehensive security law was enacted, the usefulness of regional comprehensive care systems has been emphasized. If one looks at pediatric home care from the perspective of this regional comprehensive care system, one can see that educational services appear to be an important system component. In the care system, which can be reworded as multi-sector collaboration, the existence of educational services complicates the organization of the care system, while some other opinion pointed out that the care system makes it possible by the procedure of enrollment obligation, the care system is relatively

easy to be applied compared to the elderly.

In addition, in order to get more opinions from various interests, including health care providers, doctors and nurses, childcare/teaching person, such as teachers, nursing teachers, local public organizations staffs. We organized some hearing from parents of children who receiving home health care with incurable diseases.

Although the community medical care comprehensive plan cannot avoid being criticized by personal evaluation, it is presented as a policy package that includes ex-post evaluation together with the business plan, and the location of individual business is clarified. If it is possible to present evaluation criteria and evaluation methods for business plans, which is one of the goals of this research, there will be room to enable collaboration with administrative science (planned administration theory) and community design theory.

Policy proposal

--- The decision process on business plan priorities should be clarified.

A security fund will be implemented for the adopted projects. However, for projects that are not adopted, neither the project name nor the content of the project is disclosed. For this reason, the reasons for not being adopted are not clarified, and comparisons with adopted projects cannot be made.

--- A third-party committee should be established to monitor the operation process of the business plan.

It is necessary to establish a third-party committee to examine and monitor the project relevance, tool rationality and financial relevance. The formulation of prefectural plans and the operation of the Comprehensive Medical Care Secured Fund have the characteristics of planning and funding for project execution by planners, project adopters, and ex-post evaluation for plan continuation. Finally, as is clear from the analysis of ex-post evaluation in particular, it cannot be said that appropriate and neutral evaluation has been conducted. It is highly appreciated that the business plan and its results will be made public on the HP, but if a rational allocation of financial resources is pursued, a committee should be established to continuously monitor and review the business execution process.

--- The composition of the committees involved in the prefectural planning and securing fund decision process should be reviewed.

Regarding the preparation of prefectural plans, it seems that the composition of the committees of the Hokkaido General Health Council and the subordinate committees of the Medical Expert Committee, which are in the process of approving the prefectural plan, is biased towards doctors. (Care for nursing care) Although the committee composition of the study council is unknown, in any case is it not logical to increase the weight of the committee member representing the service recipient? In order to consider the directionality of the policy of the whole area with an outlook of consistency with other plans such as medical care plan and regional medicine concept, it is desirable to have a diverse committee composition.

Development

One of the things which became clear through this research is the difficulty of grasping Hokkaido as one area. From a demographic point of view, as Hokkaido is said to be a microcosm of Japan, Hokkaido consisting of 179 municipalities has, in a sense, a policy issue that the whole of Japan embraces as it is, and it should be summarized as a regional characteristic, as such, it seems to have certain limitations.

Recognizing this, based on the results of this research, under the theme of "the realization of a symbiotic community as a place to complete the life that starts from the regional inclusive care system", we would like to keep on the research about how to cooperate the National Health Insurance System and social welfare system.