

Outline Edition
Osaka Prefectural Plan for
Senior Citizens 2018

— **Support for the aged society by** —
all members of each community —

**(Osaka Prefecture Elderly Welfare Plan and Long-Term Care
Insurance Service Support Plan)**

March 2018
Osaka Prefectural Government



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1 Positioning of the Osaka Prefectural Plan for Senior Citizens 2018

This plan was formulated based on the “Basic Guidelines for Smooth Implementation of the Long-Term Care Insurance Benefits for the Insured Long-Term Care Project” (the 2018 Notification No.57 of the Ministry of Health, Labour, and Welfare). The plan is aligned with the Long-Term Care Insurance Business Support Plan based on the Long-Term Care Insurance Act, and the Welfare Plan for the Elderly based on the Act on Social Welfare for the Elderly.

2 Outline of Osaka Prefectural Plan for Senior Citizens 2018

Chapter 1: Significance of the Plan

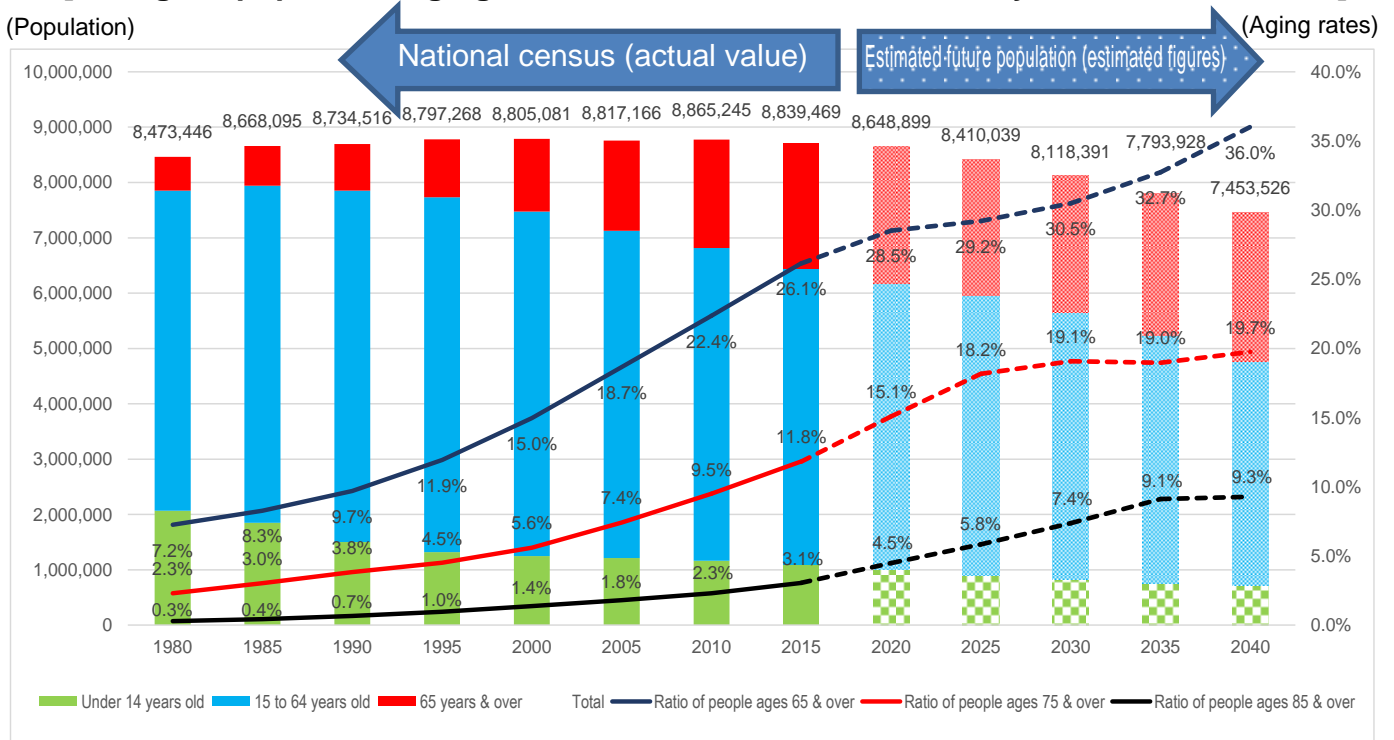
- (1) With the advent of the super aging and population declining society, Osaka Prefecture’s population is also aging fast, and the ratio of population over 75 years old accounts for 11.8% (the 2015 national census).
Especially, Osaka Prefecture having a large population composition of “the baby-boom generation” is expected to become “a senior-citizen concentrated city,” where the aged certified for long-term care need, dementia elderly, and elderly single/couple households rapidly increase.
Toward “2025” when baby boomers reach ages 75 and over and “2040” when baby boomers’ juniors reach ages 65 and over (expected to become a peak of long-term care demand), the Prefecture will have emerging problems in terms of both financial sustainability and securing care staff for the long-term care insurance system.
- (2) Considering the above problems, this plan sets “goals and indexes” to examine and implement various insurer support measures according to the communities’ situations, so that the plan becomes “a compass” for future policies for long-term care insurance service. The plan includes how to promote “community comprehensive care systems” for preventive care, prevention of aggravation, a medical care and nursing linkage, etc.
- (3) In this plan, the policies are executed along six fundamental principles: “respect for human rights,” “promotion of self-reliance support, preventive care, and prevention of aggravation,” “improvement of systems and policies to support elderly persons’ self-support and dignity,” “collaboration for promoting community comprehensive care systems,” “improvement of nursing facilities, home-visit service, and securing care staff to provide smooth service,” and “continuous welfare service and linkages with relevant institutions during disaster.”
- (4) The plan is for three years from FY2018 to FY2020. The Prefecture will manage the progress and periodically follow up the achievement every year to check the results of investigations, analyses and evaluations of “the goals and indexes.”
- (5) The Osaka Prefectural Government has established the following eight elderly welfare service areas, to coincide with the secondary medical care areas (regional units each of which offers complete general medical services) and the comprehensive medical and nursing care areas stipulated in Osaka Prefectural Plan for Regional Securement of Comprehensive Medical and Nursing Care Services (fund project).

| Area Name | Municipalities |
|---|--|
| Osaka City Elderly Welfare Service Area | Osaka City |
| Toyono Elderly Welfare Service Area | Toyonaka City, Ikeda City, Suita City, Minoh City, Toyono Town, Nose Town |
| Mishima Elderly Welfare Service Area | Takatsuki City, Ibaraki City, Settsu City, Shimamoto Town |
| Kita-kawachi Elderly Welfare Service Area | Moriguchi City, Hirakata City, Neyagawa City, Daito City, Kadoma City, Shijonawate City, Katano City |
| Naka-kawachi Elderly Welfare Service Area | Yao City, Kashiwara City, Higashiosaka City |
| Minami-kawachi Elderly Welfare Service Area | Tondabayashi City, Kawachinagano City, Matsubara City, Habikino City, Fujiidera City, Osakasayama City, Taishi Town, Kanan Town, Chihayaakasaka Village |
| Sakai City Elderly Welfare Service Area | Sakai City |
| Senshu Elderly Welfare Service Area | Kishiwada City, Izumiotsu City, Kaizuka City, Izumisano City, Izumi City, Takaishi City, Sennan City, Hannan City, Tadaoka Town, Kumatori Town, Tajiri Town, Misaki Town |

Chapter 2: The Status and Future Outlook of the Elderly Population

- (1) In 2015, Osaka Prefecture's population ratio of ages 65 and over and 75 and over is 26.1% and 11.8%, respectively, each lower than national ratio of 26.6% and 12.8%. But because the composition ratio of baby-boomers (born in 1947 to 1949) is larger, their aging is expected to progress rapidly: in 2025, population ages 75 and over will be about 1.53 million, increasing to 1.43 times during 10 years (compared with the nation's 1.35 times).

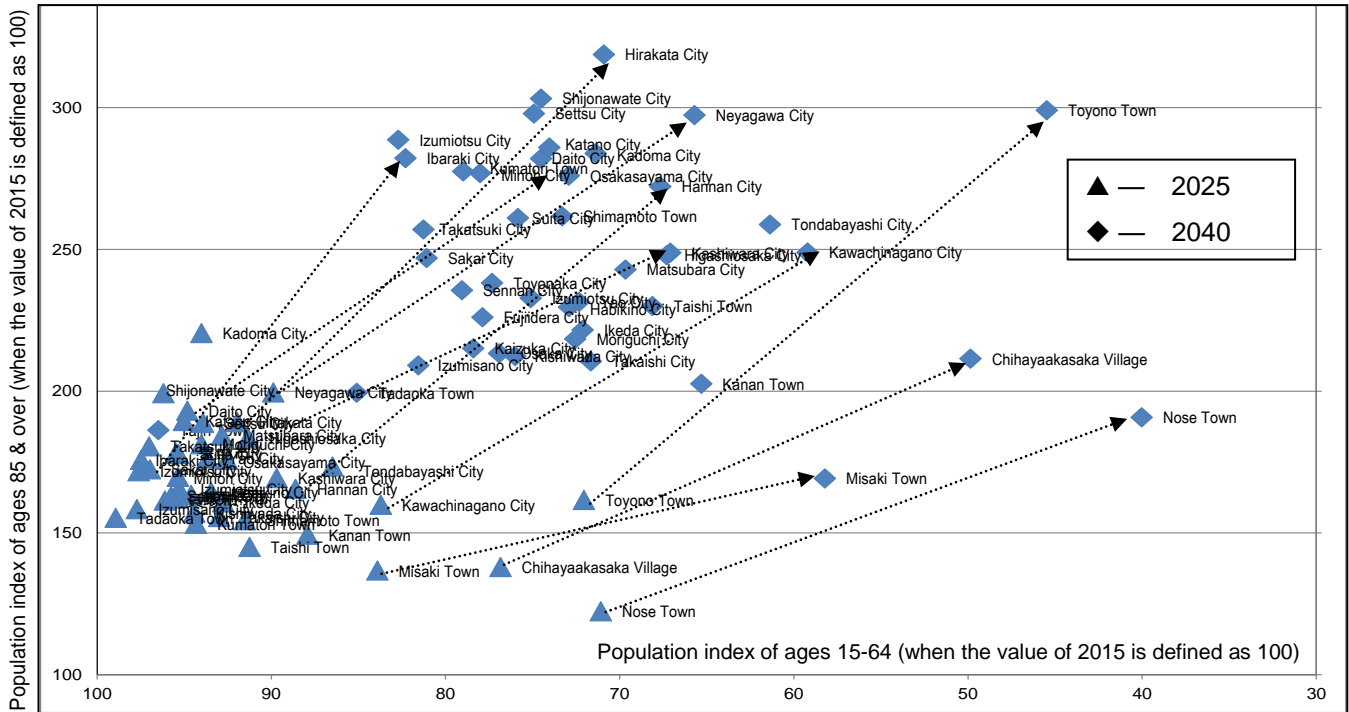
[Change in population aging rates and the number of the elderly in Osaka Prefecture]



* Prepared by Osaka Prefecture by using Ministry of Internal Affairs and Communications (MIC) "National Census" (1980 to 2015)," and National Institute of Population and Social Security Research "Japan's estimated future population by region (March-2013 estimate)"

(2) According to the estimate of the National Institute of Population and Social Security Research, it is expected that “Super aging” accelerates, working-age population continues to decrease, and population ages 85 and over increases rapidly. Because the situation of the progress to “Super aging” is significantly different by male and female and by age bracket, municipalities will be required to respond to such a situation and change.

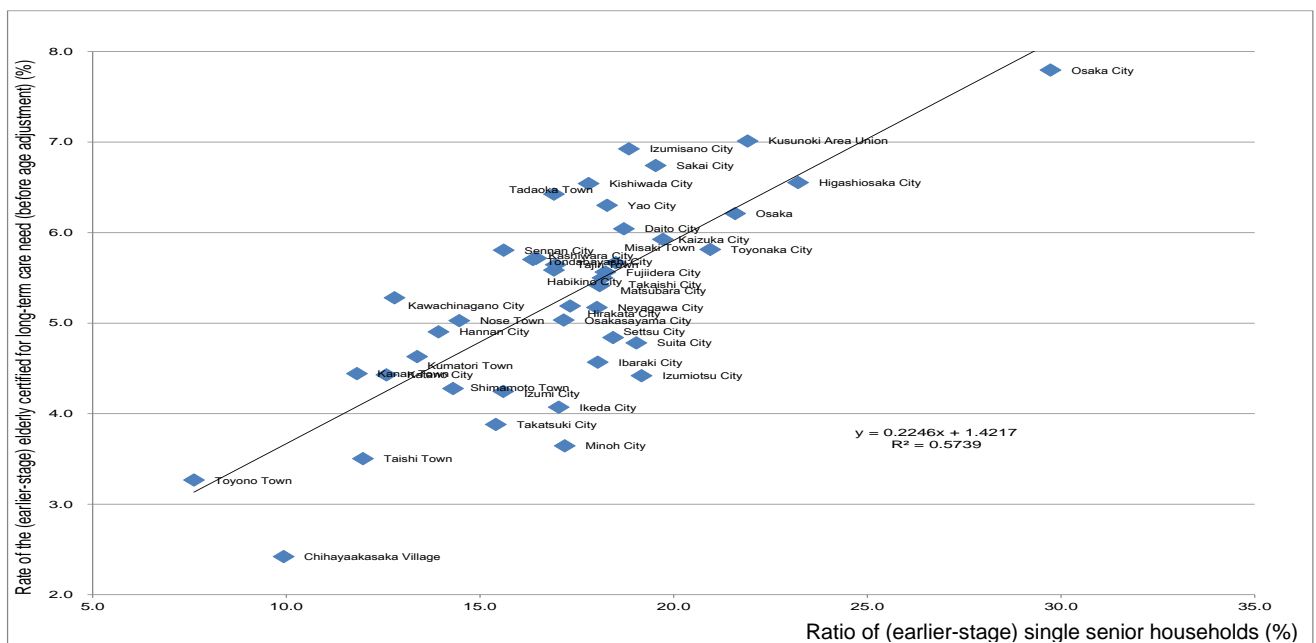
[Change in population index in each municipality in Osaka Prefecture in 2025 to 2040]



* As for 2025 and 2040, Osaka Prefecture prepared by using MIC “National Census” (2015), and National Institute of Population and Social Security Research “Japan’s estimated future population by region (March-2013 estimate)”

(3) In the general households that have members of the elderly, there is a strong correlation in percentage terms between the earlier-stage single senior households and the elderly certified for long-term care need.

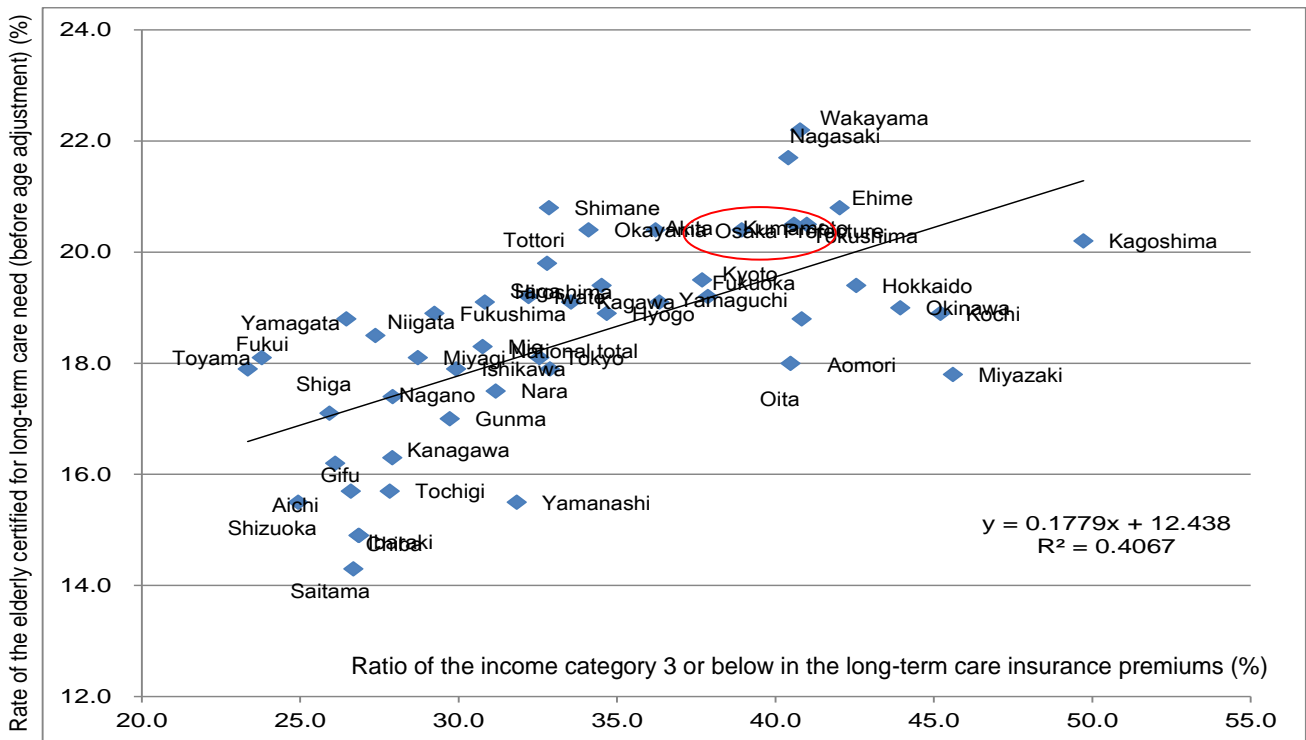
[Relationship between the rate of (earlier-stage) single senior households and the rate of the elderly (earlier-stage) certified for long-term care need (Osaka Prefecture)]



* Prepared by Osaka Prefecture by using MIC “National Census” (2015), and Ministry of Health, Labour and Welfare (MHLW) “FY2015 report on the situation of long-term care insurance business (annual report)”

- (4) Regarding the income of the elderly, there is a certain correlation between the rate of all-family-member municipal tax-exempt households (in the 1st and 3rd phases) and the rate of the elderly certified for long-term care need.

[Correlation between the income of the elderly and the rate of the elderly certified for long-term care need (before age adjustment) (nationwide) 2015]



* Prepared by Osaka Prefecture by using MIC "National Census" (2015), and MHLW "FY2015 report on the situation of long-term care insurance business (annual report)"

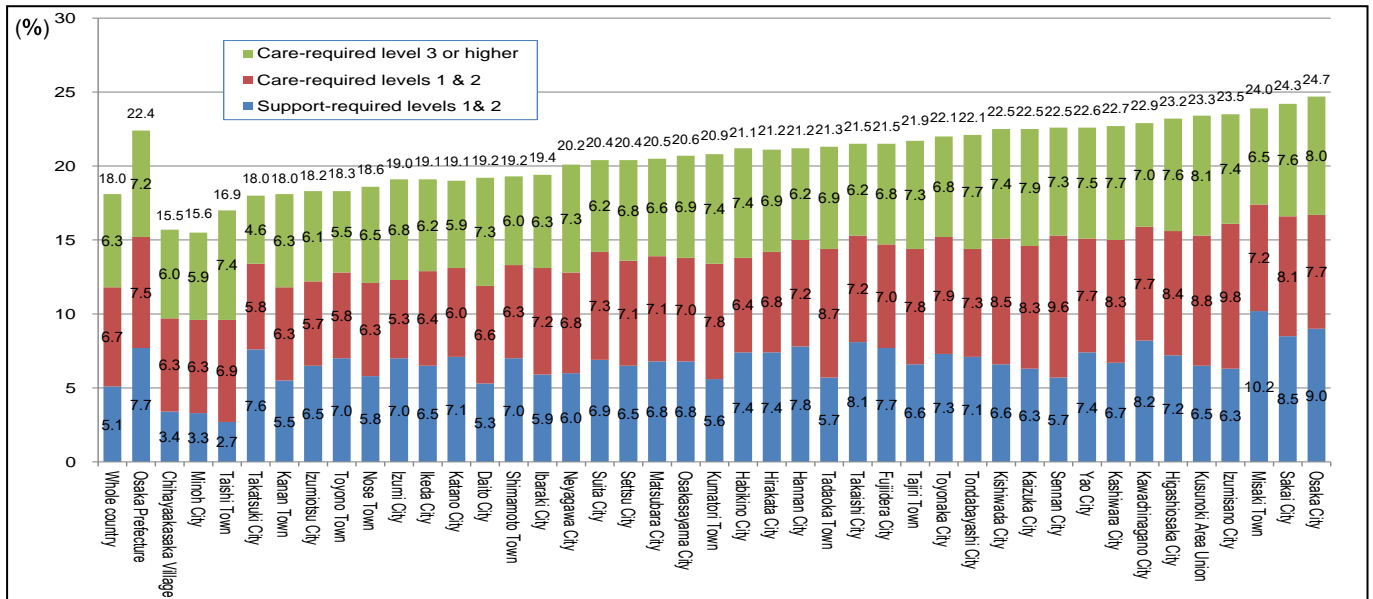
- (5) As major characteristics in Osaka Prefecture, the rate of home-visit service use, such as in-home service use, is higher than the national average both in the number of beneficiaries and the benefit-costs; on the other hand the rate of nursing facility service use (such as in the Intensive Care Home for the Elderly) is lower than that of the national average.

[Comparison of the number of users and the costs with those of the whole country]

| | | In-home services | Community-based services | Facility services |
|--------------------------------|------------------|-----------------------------|-----------------------------|-----------------------------|
| Number of users (April 2017) | Whole country | 2.91 million (62.2%) | 0.82 million (17.6%) | 0.94 million (20.1%) |
| | Osaka Prefecture | 0.23 million (68.4%) | 60,000 (16.3%) | 50,000 (15.3%) |
| Costs (May 2016 to April 2017) | Whole country | 4,456.8 billion yen (48.3%) | 1,565.5 billion yen (17.0%) | 3,212.1 billion yen (34.8%) |
| | Osaka Prefecture | 383.2 billion yen (58.8%) | 88.9 billion yen (13.6%) | 179.6 billion yen (27.6%) |

- (6) In Osaka Prefecture, the percentage of the elderly certified for long-term care need in the population ages 65 and over is 22.4% after age adjustment (FY2016), the highest in all 47 prefectures. Especially, the elderly at Care-Required Level 2 or below account for 15.2%, showing a large percentage of the elderly in need of mild care. Viewing by municipality, the percentage of the elderly in need of mild care is 24.7% in Osaka City, the highest, while 15.5% in Chihaya-akasaka village, and 15.6% in Minoh City, thus varying from region to region.

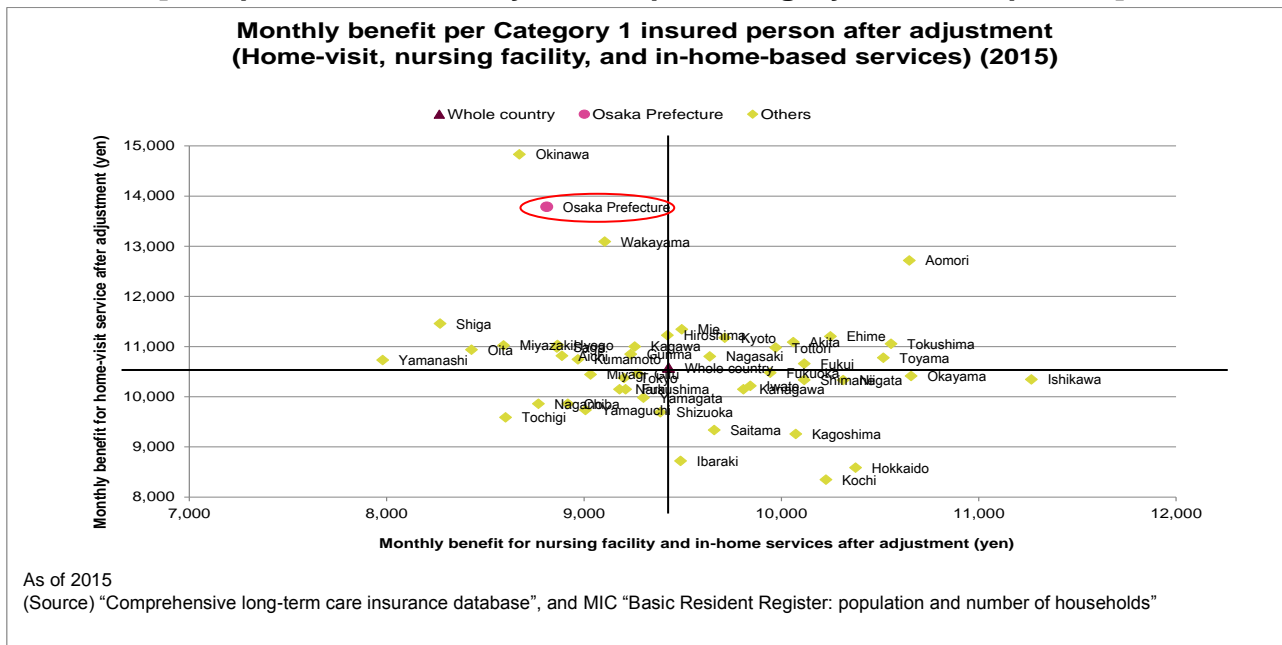
[Ratio of long-term care need certification by municipality in Osaka Prefecture (FY2016, after age adjustment)]



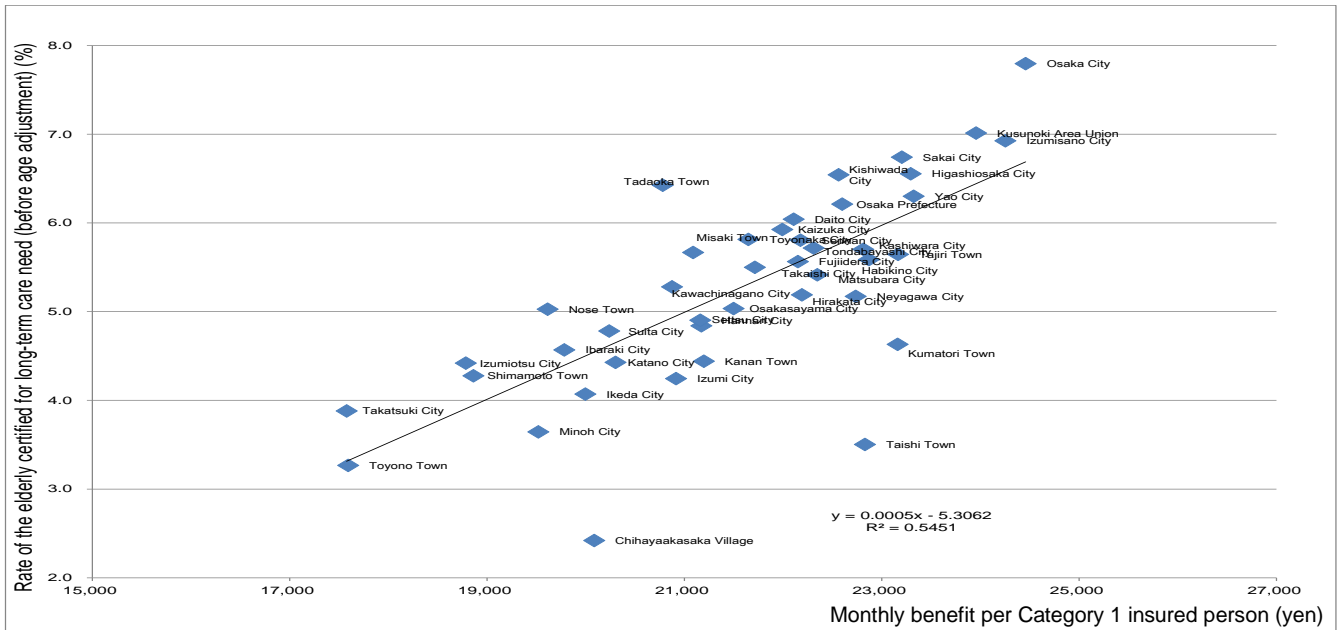
* MHLW "Report on the situation of long-term care insurance business" (monthly report), and MIC "Basic Resident Register: population and number of households"

- (7) In 2015 in Osaka Prefecture, the monthly benefit granted per person insured is 22,599 yen after age adjustment, the third largest in 47 prefectures following Okinawa and Aomori. In Osaka Prefecture, the ratio of the elderly certified for long-term care need to Category 1 insured persons strongly correlates with the amount of monthly benefit per Category 1 insured person.

[Comparison of monthly benefit per Category 1 insured person]



[Monthly benefit per Category 1 insured person and the rate of the elderly certified for long-term care need (before age adjustment) (2015)]



* Prepared by Osaka Prefecture based on MIC "National census" (2015), MHLW "Report on the situation of long-term care insurance business" (annual report) (2015), and "Comprehensive long-term care insurance database"

(8) When formulating the 7th-Phase Plan for the Elderly, Osaka Prefecture estimates that the ratio of the certified elderly in need of long-term care to Category 1 insured persons will increase from 20.5% in 2015 to 21.5% in 2018 and to 25.9% in 2025.

Osaka Prefecture summarized an "Expert Committee Report" in December 2016 to estimate the future rate of the elderly certified for long-term care need and the long-term care demand. This was made by multiplying the rate of the certified elderly in FY2014 according to the sex and age bracket by the population estimate (the National Institute of Population and Social Security Research). As a result, it is expected that the rate of the certified elderly in need of long-term care increases from 20.5% in 2015 to 27.1% in 2025 and 29.4% in 2035, and that the number of care service beneficiaries also increases to 369,000 in 2015 and to 628,000 in 2040.

The reason why the rate of the certified elderly in need of long-term care declines in 2025 in the 7th-Phase Plan is because all municipalities in Osaka Prefecture started, in April 2017, a preventive care/daily life support general program (herein after called "General Program"), in which out of the prevention benefit programs (service for Support-Required Levels 1 and 2), "the home-visit preventive care service" and "the preventive daycare service" were switched over to the "General Program."

The transition to the General Program is considered to have influenced on the increase in the number of target persons, who are determined based on the basic check lists (25 questions to confirm the conditions of their daily life and mental and physical states) without being certified for Support-Required Level 1 or 2.

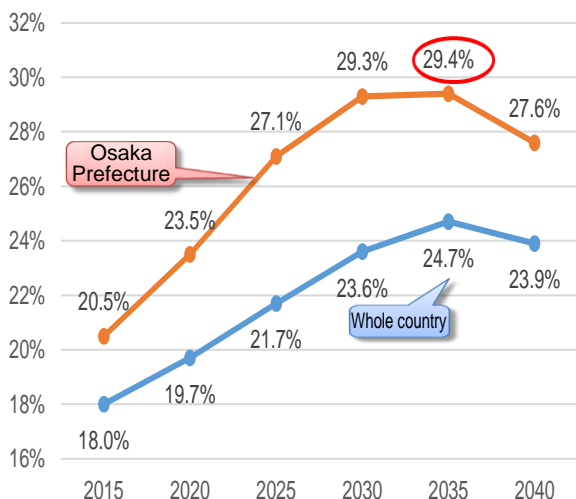
In this plan, no estimate has been made on the number of future target persons under the General Program, but when considering the needs of preventive care for such target persons, it is necessary to review comprehensively and continuously the estimate of the future number of persons certified for long-term care need, as well as the changes in the number of target persons, the necessary amount of Grants for Supporting Community Support Projects, and the conditions of target persons.

[The 7th-Phase Plan: estimate of the future number of persons certified for long-term care need in Category 1 insured persons] (Unit: person)

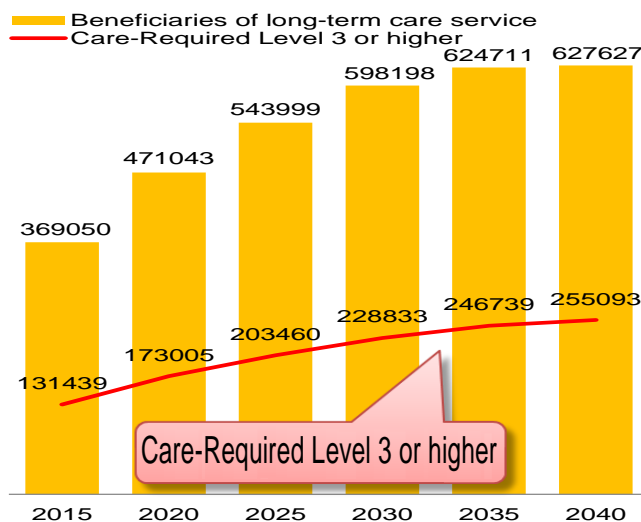
| | 2015 | 2020 | 2025 |
|---|---------|---------|---------|
| Number of persons certified for long-term care need | 470,129 | 538,158 | 614,944 |
| Rate of persons certified for long-term care need | 20.5% | 22.5% | 25.9% |

* Estimated by Elderly Citizens Care Office, Department of Welfare, Osaka Prefecture

[Estimate of the future ratio of the elderly certified for long-term care need to Category 1 insured persons]



[Estimate of the future number of beneficiaries of long-term care service]



* Source: Osaka Prefecture "Expert Meeting Report" dd. December 2016. (The estimates of both the future number of the elderly certified for long-term care need and the care demand were made by multiplying the rate of the certified elderly in 2014 according to the sex and age bracket by the population estimate (the National Institute of Population and Social Security Research).)

Chapter 3: Promotion of Health and Welfare Measures for the Elderly

(1) Self-reliance support, preventive care, and prevention of aggravation

To enhance the support for insurers' functions, Osaka Prefecture will analyze regional situations accurately by using data and by grasping the needs and issues of caregiving sites, and assist municipal approach for elderly persons' self-support, prevention of aggravation, and optimization of long-term care benefits.

The Prefecture will assist municipal implementation of the new Preventive Care/Daily Life Support Program, by improving infrastructures for livelihood support and preventive care service, creating various services through community initiatives, and improving the network of livelihood support coordinators (community mutual support promoters) across the regions.

Through a regional care meeting, the Prefecture will assist municipal efforts to promote elderly persons' self-reliance, preventive care and prevention of aggravation, train and nurture human resources who make professional advice to municipal personnel, and improve infrastructures for livelihood support and preventive care service.

The Prefecture will strive to support municipalities so that they can provide effective and preventive care service and step-up the care management for elderly persons' self-reliance in cooperation with rehabilitation specialists.

By considering the change in social situations such as rapidly growing aging population and Osaka Prefecture's declining population in 2015 (only one depopulated prefecture in the metropolitan areas), the Prefecture will address citizens' health promotion and reduction of health disparity by grasping their health status and problems in order to solve them comprehensively and systematically toward a healthy life span extension (prevention of lifestyle-related diseases and serious conditions).

[Major goals and indexes]

- Analyze and grasp current situations in the Prefecture and municipalities to understand the issues; support their efforts for elderly persons' self-reliance and prevention of aggravation; and share the content with insurers
- Decide major policies for elderly persons' self-reliance and prevention of aggravation, based on the current municipal situations and future estimate
- Evaluate the attainment of following goals and review the responses based on the results
 - Average of the attainment of municipal evaluation indexes: Higher than national average (from FY2019)
 - Rate of increase in care-need-certification reference time taken for the certification of persons for long-term care need in Osaka Prefecture: Below the national average
 - Rate of care-required level up in one year after the certification of persons for long-term care need (Care-Required Levels 1 to 4) in Osaka Prefecture (limited to beneficiaries alone before and after the certification): Below the national average
- Through fruitful regional care meeting, the Prefecture will assist municipalities to improve infrastructures for livelihood support/preventive care service, elderly persons' self-reliance support, prevention of aggravation, and to use rehabilitation specialists to provide effective preventive care service.
- Promote preventive measures against locomotive syndrome, sarcopenia, frailty, etc. toward lifestyle-related disease prevention, early recognition, and prevention of aggravation.

(2) Long-term care benefits optimization (the 4th Phase Osaka Prefecture's Plan on Optimization of Benefits)

Based on the "National Long-term Care Benefits Optimization Plan" (Notice 0707 No.1 on Aged Care dd. July 7, 2017), the Prefecture will formulate "the 4th Phase Long-term Care Benefits Optimization Plan," and aim at further optimization of long-term care benefits by promoting municipal effective initiatives.

[Major goals and indexes]

- Support for municipalities to achieve annually the major eight projects on long-term care benefits optimization, such as implementation of "verification against medical information" and "check of care plans"; dissemination of the usage of the long-term-care benefits optimization system; and proper use of external services for "housing for the aged."

(3) Efforts for construction of community comprehensive care systems

To promote a linkage of medical care and nursing, Osaka Prefecture will support municipal projects to link medical care and nursing effectively in order to construct a seamless structure of a home healthcare and home-visit care system, including rule-making for hospital discharge supports, etc. Regarding measures against dementia, the Prefecture, under the New Orange Plan, will promote various measures to establish a circulatory system under which early recognition and early response can be performed and proper, seamless medical care can be provided timely according to a change in symptoms of dementia, and, in addition, will provide overall support for both persons with early-onset dementia and their caregivers.

To strengthen the functions of community comprehensive support centers, the Prefecture will support municipalities to take various measures for efficient operation, effective management, and proper allocation of staff members, so that the centers can fully exhibit their responsible functions.

To protect elderly persons' human rights, the Prefecture will support municipalities so that they can take measures to respond to elderly person abuse cases properly and quickly, and prevent abuse by raising caregivers' knowledge and awareness of abuse and physical restraint. Also the Prefecture will promote the use of the adult guardianship system according to the municipal situations.

[Major goals and indexes]

- Support for municipal efforts toward a linkage of medical care and nursing so that such services can be provided seamlessly
- Support for municipal measures against various symptoms of dementia, based on the PDCA cycle, (e.g. education to raise capability of various healthcare workers to deal with dementia and training of dementia-support doctors)
- Promotion of measures taken in each prefecture against early-onset dementia, based on the PDCA cycle, and nurturing dementia supporters

(4) Improvement of houses and service infrastructures according to various ways of living desired by citizens and to regional situations

Regarding qualitative and quantitative improvement of houses for the elderly and promotion of a town plan, the Prefecture will proceed with welfare town planning, based on Osaka Prefecture's Housing Plan for the Elderly and Persons with Disabilities (the period of the plan: FY2016 to FY2025), so that the elderly and disabled can live safely, comfortably and with peace of mind in a place where they get used to living. Based on the "Osaka Prefecture Rental Housing Supply Promotion Plan" under the Housing Safety Net Act, the Prefecture will promote registration of houses that offer rental housing to Persons Requiring Special Assistance in Securing Housing, and will make known to citizens about the designated Housing Assistance Corporations that support after-moving livelihood and the Payment Proxy Service System, through proper and smooth operation of such systems.

The Prefecture will improve the long-term care insurance facilities systematically, by bearing a regional balance in mind and based on the service requirements estimated by municipalities on the needs of the elderly and the balance of their benefits and burdens. The Prefecture will also improve private room/unit-type facilities in the Intensive Care Home for the Elderly and the elderly health care facilities, and will support smooth conversion from the medical long-term care sanatoriums to the care medical centers or long-term care insurance facilities.

Regarding a support system during a disaster, the Prefecture will assist municipalities to improve it so that the elderly can be supported quickly and properly, and that in peacetime, those who require special assistance can be watched over routinely. In addition the Prefecture will take necessary measures to respond to citizens' welfare needs during a disaster.

Regarding the regular home visit service, as-needed home-visit care/nursing service, and multifunctional small group in-home/medical service, etc., the Prefecture will assist municipalities to improve community-based care services according to their situations.

[Major goals and indexes]

- Promotion of housing procurement and a welfare town planning so that the elderly and persons with disabilities can live safely, comfortably and with peace of mind in a place where they get used to living; supplying adequate housing according to elderly persons' needs; and increase in barrier-free states in their house
- Regarding the percentage of FY2025 of private/unit-type rooms in the Intensive Care Home for the Elderly and the elderly health care facilities, the Prefecture will make efforts to surpass that of national reference standards (50% or more in the elderly health care facilities, and 70% or more in the Intensive Care Home for the Elderly).
- Based on the municipal policies, the Prefecture will support their community-based care service actively and systematically, by making the multifunctional small group in-home care service known to people, so that, whenever possible, the elderly can live in a place where they get used to living.

(5) Securing care staff and improvement of their quality

Based on the “Osaka Prefecture’s Strategy for Securing Care/Welfare Human Resources” established in November 2017, the Prefecture will inspect/review the existing policy to develop a new one as needed, and under this Plan, will manage the progress of the strategy to secure and nurture such human resources who are responsible for health and medical service, while enhancing their quality.

[Major goals and indexes]

- Based on both the future number of care staff estimated in the 2025 and this Plan and the “Human Resources Securing Strategy,” the Prefecture will implement necessary measures via three approaches, “Promotion of care staff recruitment,” “Improvement of treatment and work environment,” and “Enhancement of quality.”

(6) Proper operation of long-term care insurance projects

To operate the Long-term Care Insurance System in a fair and impartial manner, the Prefecture will make necessary efforts for proper certification of long-term care need.

To offer quality service to each of the elderly persons with disabilities according to their conditions, it is necessary to grasp the characteristic of individual problem through communication and improve the system to provide better service so that such persons can selectively use it by their own will. To do that, it is necessary to maintain the quality of service, improve the abilities of care manager, and promote service providers’ self-, external-, and third-party evaluations.

As for guidance and advice to service providers, the Prefecture will supervise and support them effectively so that they can provide proper service from the perspective of users and that they can respond properly to an accident, infectious disease or disaster, etc. to help the users. Besides, the Prefecture will assist municipalities to exercise their authority over service providers to provide adequate guidance and supervision.

The Prefecture will improve the system of consultation desks to respond to users’ dissatisfactions and complaints properly and quickly so that the users can consult without hesitation; conduct a fair hearing at the “Osaka Prefecture Certification Committee for Long-Term Care Insurance” in regard to the certification of eligibility for long-term care need, decision of insurance premiums, or appeal against municipality’s disposal (request for examination); ensure the remedy for insured person’s rights; and operate the long-term care insurance system properly.

Regarding the publication and dissemination of the long-term care information and systems, the Prefecture will notify people, in an easy-to-understand way, about the purpose and mechanism of the system, procedures for application for use, and information on service providers, so that the elderly can actively use necessary services. The Prefecture will also strengthen a linkage of medical care and nursing by sharing the information of medical/care resources and setting relevant meeting bodies.

[Major goals and indexes]

- Support for various regional approaches according to their situations so that insurers’ functions can be effectively exhibited when certifying the eligibility for long-term care need and service use.

(7) Toward regional symbiotic society

Regarding the construction of a comprehensive support system, a “self- and all-driven” system, the Prefecture will assist municipalities to improve environment in which citizens can actively grasp and solve the problems of community life in “their familiar sphere,” and to construct a comprehensive consultation system under which such problems can be dealt with totally. The Prefecture will offer technical advice to municipalities on community planning for the “self- and all-driven” system to nurture human resources and create information sharing forums across the municipalities. Also the Prefecture will promote welfare education with a view to developing human resources who will play a role in the social welfare field in the future.

The Prefecture will promote measures for elderly persons’ social involvement and their employment and work, so that they can utilize their rich experiences and abilities.

Chapter 4: Estimated Service Volume of Long-Term Care and Total Capacity Necessary to Accommodate Residents (Users)

(1) Estimated number of persons certified as requiring support or long-term care

The table below shows the estimated number of persons certified as requiring support or long-term care, by support/care level. Estimates were calculated by adding the municipal estimates calculated by each municipal government taking into consideration the implementation status of the community support projects (long-term care prevention projects) and preventive care services, as well as the expected effects from long-term care prevention efforts.

[Estimated number of persons certified as requiring support or long-term care by support/care level]

(Unit: person)

| Support/Care Level | FY2018 | FY2019 | FY2020 | FY2025 <i>(Reference)</i> |
|--------------------------|---------|---------|---------|------------------------------|
| Total | 517,044 | 533,107 | 548,580 | 627,039 |
| Support-Required Level 1 | 100,456 | 102,908 | 105,069 | 117,516 |
| Support-Required Level 2 | 76,135 | 78,150 | 80,020 | 89,106 |
| Care-Required Level 1 | 84,829 | 87,489 | 90,089 | 104,691 |
| Care-Required Level 2 | 88,807 | 91,163 | 93,523 | 105,659 |
| Care-Required Level 3 | 61,789 | 63,924 | 66,034 | 76,638 |
| Care-Required Level 4 | 58,519 | 61,348 | 64,179 | 75,893 |
| Care-Required Level 5 | 46,509 | 48,125 | 49,666 | 57,536 |

*The number of the certified persons for long-term care/support need includes Category 2 insured persons (40 to 64 years old).

(2) Estimated long-term care service volume

The service volume of long-term care services was estimated by each municipal government, based on the past data on the use of services and the estimated number of persons certified as requiring long-term care (support), as well as intentions for future use of service surveyed through questionnaires.

| Service volume | | FY2018 | FY2019 | FY2020 | FY2025 (Reference) |
|-------------------|--|------------|------------|------------|-----------------------|
| In-home services | In-home long-term care support (persons/month) | 210,826 | 218,212 | 226,053 | 262,929 |
| | Home-visit long-term care (times/year) | 43,698,692 | 46,050,231 | 48,527,707 | 58,264,302 |
| | Home-visit bathing (times/year) | 268,004 | 281,291 | 294,940 | 363,224 |
| | Home-visit nursing (times/year) | 5,231,127 | 5,602,918 | 6,014,717 | 7,479,638 |
| | Home-visit rehabilitation (times/year) | 1,116,765 | 1,178,933 | 1,245,231 | 1,497,741 |
| | Outpatient day care (times/year) | 8,767,964 | 9,170,641 | 9,599,220 | 11,633,321 |
| | Outpatient rehabilitation (times/year) | 2,911,064 | 3,032,443 | 3,154,837 | 3,756,146 |
| | Short-stay life care (days/year) | 2,236,256 | 2,328,554 | 2,437,556 | 3,162,891 |
| | Short-stay medical care (days/year) | 327,188 | 347,737 | 370,052 | 462,328 |
| | Welfare equipment rental (thousand yen/year) | 24,115,477 | 25,282,406 | 26,419,801 | 31,529,568 |
| | Sale of specified welfare equipment (thousand yen/year) | 1,068,023 | 1,119,304 | 1,160,292 | 1,377,986 |
| | Housing renovation (thousand yen/year) | 2,023,980 | 2,124,999 | 2,227,589 | 2,691,616 |
| | In-home care management guidance (persons/month) | 69,588 | 74,050 | 78,409 | 95,790 |
| | Daily life care for residents in specified facilities (persons/month) | 14,720 | 15,375 | 15,892 | 18,415 |
| Facility services | Designated facilities covered by public aid providing long-term care to the elderly (persons/month) | 33,047 | 33,888 | 34,402 | 37,339 |
| | Elderly health care facilities (persons/month) | 20,673 | 21,187 | 21,311 | 22,741 |
| | Care medical centers (persons/month) | 404 | 652 | 940 | 2,758 |
| | Designated medical care facilities (persons/month) | 1,494 | 1,276 | 1,244 | — |

| Service volume | | FY2018 | FY2019 | FY2020 | FY2025 (Reference) |
|--|--|--|-----------|-----------|-----------------------|
| Preventive long-term care services | Preventive long-term care support (persons/month) | 69,412 | 71,477 | 73,221 | 84,764 |
| | Home-visit bathing service for long-term care prevention (times/year) | 1,100 | 1,118 | 1,220 | 1,327 |
| | Home-visit nursing for long-term care prevention (times/year) | 725,946 | 802,971 | 887,188 | 1,064,104 |
| | Home-visit rehabilitation for long-term care prevention (times/year) | 176,996 | 200,998 | 226,519 | 306,551 |
| | Outpatient rehabilitation for long-term care prevention (persons/month) | 9,141 | 9,689 | 10,225 | 12,224 |
| | Short-stay life care for long-term care prevention (days/year) | 20,262 | 21,792 | 23,833 | 28,482 |
| | Short-stay medical care for long-term care prevention (days/year) | 3,057 | 3,503 | 3,638 | 4,874 |
| | Welfare equipment rental for long-term care prevention (thousand yen/year) | 3,233,481 | 3,441,759 | 3,626,054 | 4,228,785 |
| | Sale of specified welfare equipment for long-term care prevention (thousand yen/year) | 398,807 | 415,651 | 431,517 | 489,947 |
| | Housing renovation for long-term care prevention (thousand yen/year) | 1,708,703 | 1,776,498 | 1,833,433 | 2,122,127 |
| | In-home care management guidance for long-term care prevention (persons/month) | 5,030 | 5,418 | 5,795 | 6,963 |
| | Daily life care for residents in specified facilities for long-term care prevention (persons/month) | 2,339 | 2,502 | 2,632 | 3,090 |
| | Community-based (preventive long-term care) services | Regular/on-demand home-visit long-term/nursing care (persons/month) | 1,438 | 1,712 | 1,911 |
| Nighttime home-visit long-term care (persons/month) | | 329 | 342 | 359 | 442 |
| Outpatient day care for the elderly with dementia (times/year) | | 3,822,683 | 4,013,684 | 4,218,460 | 5,137,205 |
| Multifunctional long-term care in small group home (persons/month) | | 436,850 | 462,559 | 488,742 | 614,441 |
| Communal daily life care for the elderly with dementia (persons/month) | | 3,395 | 3,833 | 4,256 | 5,317 |
| Daily life care for residents in community-based specified facilities (persons/month) | | 10,848 | 11,381 | 11,968 | 14,025 |
| Daily life care for residents in community-based facilities covered by public aid providing long-term care to the elderly (persons/month) | | 312 | 312 | 370 | 622 |
| Combined services (Home-visit nursing & multifunctional long-term care in small group home) (persons/month) | | 3,539 | 3,974 | 4,551 | 5,600 |
| Community-based outpatient day care (times/year) | | 887 | 1,213 | 1,453 | 1,842 |
| Preventive outpatient day care for the elderly with dementia (times/year) | | 3,820 | 4,297 | 4,486 | 7,064 |
| Multifunctional preventive long-term care in small group home (persons/month) | | 442 | 522 | 596 | 715 |
| Preventive communal daily life care for the elderly with dementia (persons/month) | | 35 | 41 | 47 | 58 |

(3) Total capacity necessary to accommodate users (residents) of facility/housing-type services and community-based services

(Unit: person)

| Type | End of FY2017 Estimate (for reference) | FY2018 | FY2019 | FY2020 | Difference from that of the end of FY2017 |
|---|--|--------|--------|--------|---|
| Services at facilities covered by long-term care insurance | | | | | |
| Designated facilities covered by public aid providing long-term care to the elderly | 32,648 | 33,409 | 33,852 | 34,314 | 1,666 |
| Elderly health care facilities | 20,855 | 21,215 | 21,274 | 21,424 | 569 |
| Care medical centers | — | 0 | 0 | 100 | 100 |
| Designated medical care facilities | 1,653 | 1,129 | 1,129 | 1,069 | -584 |
| Housing-type services | | | | | |
| Daily life care for residents in specified facilities specialized in long-term care | 738 | 799 | 799 | 799 | 61 |
| Daily life care for residents in combined specified facilities | 18,453 | 21,060 | 21,569 | 22,051 | 3,598 |
| Community-based services | | | | | |
| Communal daily life care for the elderly with dementia | 11,578 | 11,954 | 12,423 | 12,955 | 1,377 |
| Daily life care for residents in community-based specified facilities | 312 | 312 | 341 | 428 | 116 |
| Daily life care for residents in community-based facilities covered by public aid providing long-term care to the elderly | 3,413 | 3,741 | 4,147 | 4,640 | 1,227 |

* The facilities covered by long-term care insurance have been established by considering the volume of needs estimated by each of municipalities and their intent for facility development. However, as for designated medical care facilities, construction of new facilities is not expected.

* As for the daily life care for residents in specified facilities and the community-based service, the calculation has been made based on the volume of needs estimated by the municipalities according to the situations.

(4) [Reference] Estimates of long-term care benefits, etc. during the Plan period

○ Standard long-term care benefits costs (estimation)

(Unit: million yen)

| | FY2018 | FY2019 | FY2020 |
|--|---------|---------|---------|
| Costs of services covered by long-term care benefits | 678,816 | 719,022 | 759,090 |
| High-cost long-term care (preventive care) service costs | 19,639 | 21,476 | 23,195 |
| High-cost combined medical and long-term care (preventive care) service costs | 2,380 | 2,570 | 2,745 |
| Costs of long-term care (preventive care) service for specified facility residents | 20,423 | 21,443 | 22,594 |
| Examination/payment fees | 654 | 690 | 728 |
| Total costs of standard long-term care benefits | 721,912 | 765,200 | 808,352 |

○ Costs of community support projects (estimation)

(Unit: million yen)

| | FY2018 | FY2019 | FY2020 |
|--|--------|--------|--------|
| Costs of comprehensive preventive care/daily life support projects | 34,871 | 36,458 | 37,944 |
| Costs of comprehensive support projects and voluntary projects | 14,076 | 14,581 | 14,917 |
| Total costs of community support projects | 48,948 | 51,039 | 52,861 |

○ Average value of standard insurance premium amounts (estimation)

(Unit: yen/month)

| | 5th period | 6th period | 7th period |
|-----------------------------------|------------|------------|------------|
| Standard insurance premium amount | 5,303 | 6,025 | 6,636 |
| Increased amount of money | 717 | 722 | 611 |

* Weighted average of Osaka Prefecture

The average value of standard insurance premium amounts (estimation) is 9,116 yen/month.

Chapter 5: Review of Osaka Prefectural Plan for Senior Citizens 2015

| | | FY2015 | | | FY2016 | | |
|--|-----------|---------|---------|----------|---------|---------|----------|
| | | Plan | Results | vs. plan | Plan | Results | vs. plan |
| Number of persons certified as requiring support or long-term care | (persons) | 488,445 | 479,915 | 98.3% | 515,387 | 492,753 | 95.6% |

| Service volume | | FY2015 | | | FY2016 | | |
|---|---------------------|------------|------------|----------|------------|------------|----------|
| | | Plan | Results | vs. plan | Plan | Results | vs. plan |
| In-home services | | | | | | | |
| In-home long-term care support | (persons/month) | 190,310 | 189,919 | 99.8% | 198,536 | 197,567 | 99.5% |
| Home-visit long-term care | (times/year) | 35,004,227 | 37,499,570 | 107.1% | 36,682,494 | 40,298,128 | 109.9% |
| Home-visit bathing | (times/year) | 259,345 | 246,911 | 95.2% | 266,827 | 248,888 | 93.3% |
| Home-visit nursing | (times/year) | 3,677,719 | 4,028,870 | 109.5% | 3,998,295 | 4,490,528 | 112.3% |
| Home-visit rehabilitation | (times/year) | 947,267 | 899,582 | 95.0% | 1,008,707 | 936,745 | 92.9% |
| Outpatient day care | (times/year) | 10,726,176 | 11,013,331 | 102.7% | 6,215,650 | 8,100,606 | 130.3% |
| Outpatient rehabilitation | (times/year) | 2,744,457 | 2,678,783 | 97.6% | 2,849,133 | 2,726,670 | 95.7% |
| Short-stay life care | (days/year) | 1,998,595 | 1,924,246 | 96.3% | 2,128,436 | 2,015,053 | 94.7% |
| Short-stay medical care | (days/year) | 311,095 | 284,666 | 91.5% | 331,249 | 290,956 | 87.8% |
| Welfare equipment rental | (thousand yen/year) | 20,191,333 | 21,063,286 | 104.3% | 21,007,034 | 22,233,872 | 105.8% |
| Sale of specified welfare equipment | (thousand yen/year) | 1,134,341 | 964,614 | 85.0% | 1,186,228 | 949,633 | 80.1% |
| In-home care management guidance | (persons/month) | 53,283 | 55,343 | 103.9% | 56,714 | 61,112 | 107.8% |
| Daily life care for residents in specified facilities | (persons/month) | 13,045 | 11,744 | 90.0% | 13,908 | 12,245 | 88.0% |
| Facility services | | | | | | | |
| Designated facilities covered by public aid providing long-term care to the elderly | (persons/month) | 30,065 | 29,253 | 97.3% | 31,515 | 29,846 | 94.7% |
| Elderly health care facilities | (persons/month) | 19,594 | 19,117 | 97.6% | 20,301 | 19,210 | 94.6% |
| Designated medical care facilities | (persons/month) | 2,474 | 2,326 | 94.0% | 2,470 | 2,034 | 82.3% |

Source: Implementation status of the insured long-term care service plans

| Service volume | | FY2015 | | | FY2016 | | |
|---|---------------------|-----------|-----------|----------|-----------|-----------|----------|
| Preventive long-term care services | | Plan | Results | vs. plan | Plan | Results | vs. plan |
| Preventive long-term care support | (persons/month) | 100,493 | 98,522 | 98.0% | 109,407 | 103,044 | 94.2% |
| Home-visit preventive care | (persons/month) | 61,680 | 57,139 | 92.6% | 65,592 | 56,541 | 86.2% |
| Home-visit bathing service for long-term care prevention | (times/year) | 1,470 | 780 | 53.1% | 1,991 | 476 | 23.9% |
| Home-visit nursing for long-term care prevention | (times/year) | 431,445 | 473,959 | 109.9% | 501,801 | 571,516 | 113.9% |
| Home-visit rehabilitation for long-term care prevention | (times/year) | 89,073 | 93,135 | 104.6% | 100,372 | 109,128 | 108.7% |
| Outpatient day care for long-term care prevention | (persons/month) | 37,118 | 38,461 | 103.6% | 41,066 | 40,907 | 99.6% |
| Outpatient rehabilitation for long-term care prevention | (persons/month) | 6,537 | 6,421 | 98.2% | 7,343 | 7,460 | 101.6% |
| Short-stay life care for long-term care prevention | (days/year) | 20,620 | 17,017 | 82.5% | 24,360 | 17,549 | 72.0% |
| Short-stay medical care for long-term care prevention | (days/year) | 3,863 | 2,688 | 69.6% | 4,771 | 2,674 | 56.0% |
| Welfare equipment rental for long-term care prevention | (thousand yen/year) | 2,303,563 | 2,442,409 | 106.0% | 2,564,883 | 2,488,922 | 97.0% |
| Sale of specified welfare equipment for long-term care prevention | (thousand yen/year) | 443,853 | 358,380 | 80.7% | 499,953 | 361,512 | 72.3% |
| In-home care management guidance for long-term care prevention | (persons/month) | 3,785 | 3,771 | 99.6% | 4,230 | 4,254 | 100.6% |
| Daily life care for residents in specified facilities for long-term care prevention | (persons/month) | 1,888 | 1,823 | 96.6% | 2,057 | 2,025 | 98.4% |
| Community-based (preventive long-term care) services | | | | | | | |
| Regular/on-demand home-visit long-term/nursing care | (persons/month) | 1,418 | 1,038 | 73.2% | 1,806 | 1,087 | 60.2% |
| Nighttime home-visit long-term care | (persons/month) | 548 | 351 | 64.1% | 616 | 310 | 50.3% |
| Community-based outpatient day care | (times/year) | | | | 5,291,953 | 3,533,160 | 66.8% |
| Outpatient day care for the elderly with dementia | (times/year) | 407,638 | 384,586 | 94.3% | 443,736 | 392,325 | 88.4% |
| Multifunctional long-term care in small group home | (persons/month) | 3,209 | 2,711 | 84.5% | 3,601 | 2,879 | 80.0% |
| Communal daily life care for the elderly with dementia | (persons/month) | 10,172 | 9,178 | 90.2% | 10,929 | 9,579 | 87.6% |
| Daily life care for residents in community-based specified facilities | (persons/month) | 273 | 176 | 64.5% | 476 | 228 | 47.9% |
| Daily life care for residents in community-based facilities covered by public aid providing long-term care to the elderly | (persons/month) | 2,774 | 2,426 | 87.5% | 3,448 | 2,658 | 77.1% |
| Combined services (Home-visit nursing & multifunctional long-term care in small group home) | (persons/month) | 424 | 254 | 59.9% | 695 | 390 | 56.1% |
| Preventive outpatient day care for the elderly with dementia | (times/year) | 4,550 | 2,351 | 51.7% | 5,818 | 2,510 | 43.1% |
| Multifunctional preventive long-term care in small group home | (persons/month) | 402 | 309 | 76.9% | 464 | 333 | 71.8% |
| Preventive communal daily life care for the elderly with dementia | (persons/month) | 20 | 23 | 115.0% | 21 | 19 | 90.5% |

Source: Implementation status of the insured long-term care service plans



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