# Universal Health Coverage and Patient Safety - Experience of Japan -

Vice Minister for Health Chief Medical & Global Health Officer

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# Japan as a top runner...but really?

- ◆ Japan achieved universal health coverage of the nation in 1961.
- ◆ Japan's health system ranked top in overall goal achievement.

- WHO report 2000.

Yes, the coverage was nationwide.

But how was the quality of health service delivery?



## Major Medical Malpractice Cases Occurred.

- ◆ January 1999: Yokohama City University Hospital Two patient mix-up in the Surgery and the wrong body parts were operated to both patients.
- February 1999: Tokyo Metropolitan Hiroo Hospital

  A postoperative patient was mistakenly injected disinfectant instead of an anticoagulant.

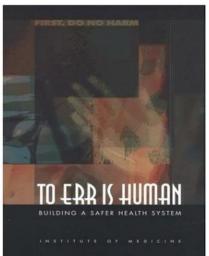
  As a result, the patient died.
- ◆ February 2000: Kyoto University Hospital

  The hospital staff mistakenly put ethanol into a humidifying unit of a respirator instead of distilled water.

  As a result, the patient died.
- ◆April 2000: Tokai University Hospital
  A drug that should be given orally was mistakenly given by intravenous injection.
  As a result, pediatric patient died.

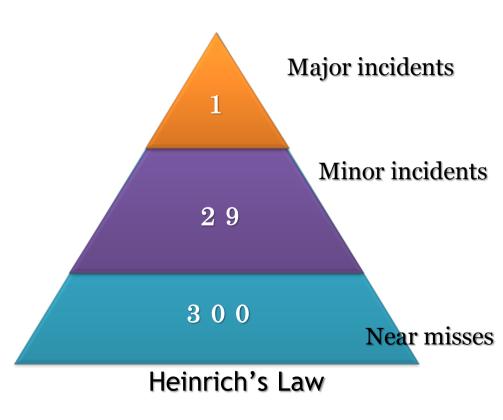


## To Err is Human





(1999 Institute of Medicine)





## Our key map after the series of adverse events Planned in 2005

Patient participation/empower ment

informed consent
 Being part of healthcare
 improvement process

Misuse proof improvement of

drugs, medical devices, etc.

People

Healthcare Providers

- In-hospital reporting system
- Safety management system
- Guidelines for safety measures
- Training staff, etc.

Manufacturers Governments

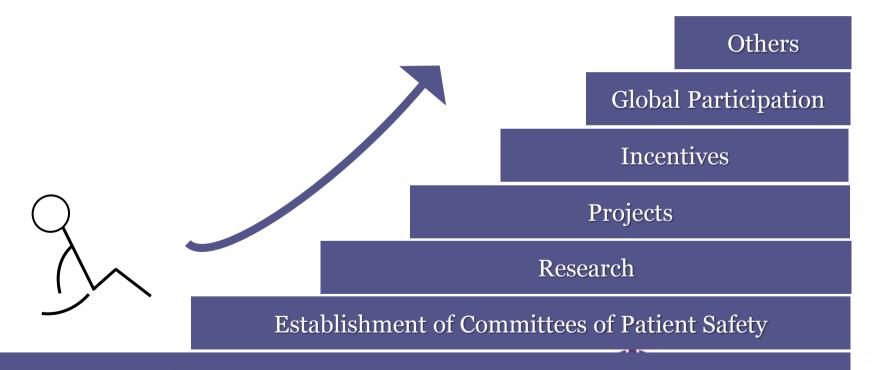
- Incident reporting system
- Educational workshops
- Instructions to medical institutions / manufacturers
- Research, etc.

All players taking action together to promote patient safety.



# Steps that Japanese government have made so far

#### TO IMPROVE PATIENT SAFETY

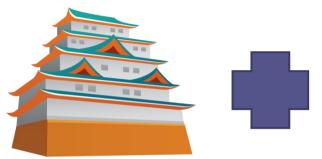


Established Office of Patient Safety Promotion w/i MoH

3rd Patient Safety Summit

2018/4/13



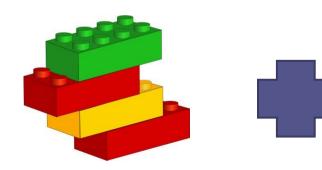


Adding on Patient Safety Measures and System



Inefficient & Costly

**Established** Health System



**Installing** Patient Safety Measures and System



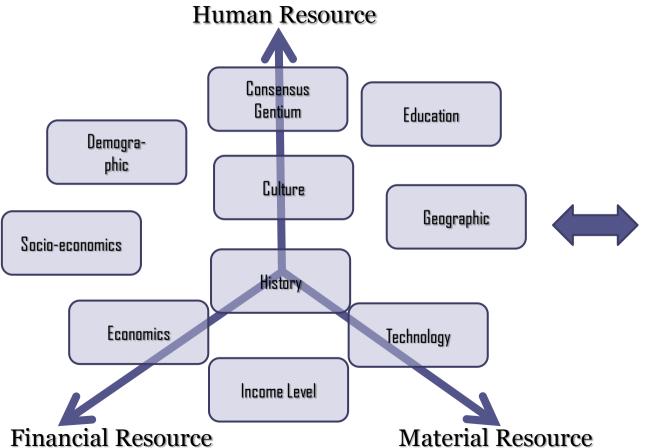
Efficient & Cost Effective

Health System at Early Stage



## **Background of Patient Safety**

3rd Patient Safety Summit 2018/4/13



**Policies** 

Health service delivery

Projects & Measurements

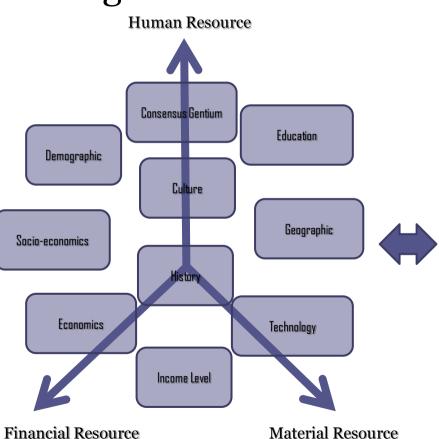


## **Background of Patient Safety**





2018/4/13



Patient safety culture

Patient safety in ageing society

Patient safety needs for achieving U H C in LMICs

<u>ICT in patient safety</u>

Economics of patient safety

Policies



Projects & Measurements

Health service delivery





## Patient Safety 0

Global Ministerial Summit 2018 2018/4/13

Main Contents of Today

Patient safety

culture

Patient safety in

ageing society

Patient safety needs for

UHC in LMICs

ICT in patient safety

Economics of patient

safety

Dr. Donald Berwick

Dr. Tomonori Hasegawa

Dr. Tommaso Bellandi

Dr. Neelam Dhingra-Kumar

Mr. Jeremy HM Veillard

Dr. Hiroshi Takeda

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President Emeritus and Senior Fellow, Institute for Healthcare Improvement, USA

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Director, Service Delivery and Safety, WHO-HQ

**Dr Ingo Hartel**, Federal Ministry of Health, Germany

Coordinator, Patient Safety and Risk Management, WHO-HQ

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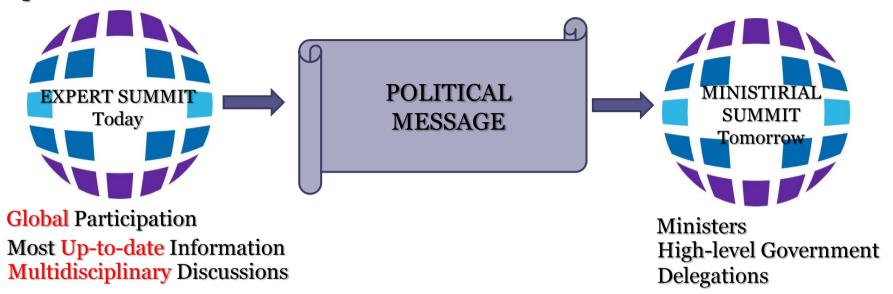
Program Manager, Primary Health Care Performance Initiative, The World Bank

President, Graduate School of Health Care Science Jikei Institute, IMIA, Japan

Ms. Chris Power

President, Canadian Patient Safety Institute, Canada

### **Expected Outcome of the Summit**



We expect that lessons from this Summit will influence

**Policies** 

**Patient Safety** 

Health service delivery

Projects & Measurements

on patient safety, tailored to each country's specific human resource, Global Ministerial Summit 2018 material resource and financial resource "background".

2018/4/13



















3rd Patient Safety Summit

2018/4/13



