The difference and influence of the primary judgment with certification standard of long-term care needed between 2006 and 2009 Oct. version

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Purpose:
The accreditation criteria of certification standards of long-term care needed level have been changed to be stricter at the fiscal year 2009 in Japan. The difference and influence by the amendment of the certification standard for long-term care needed were compared in the primary judgment between the fiscal year 2006 and the fiscal year 2009 of October version at the synchronized anlisis.

Methods:
1. Research objective
The surveyees of this study were extracted from total 16 facilities, which consisted of 8 residential institutes and 8 home care facilities. The total 608 of the surveyees were collected form the long-term care needed and assist needed with 400 in residential and 208 in home associated facilities. Moreover, for the research period, they were surveyed from October, 2009 to January, 2010.
2. Analytical method
As for the synchronized analysis, a care manager or a life adviser social worker surveyed the same long-term care needed or assisted at the same time with the certification standard for long-term care needed with 2009, October and 2006 version. In this research, the difference and influence of primary judgment certification with both long-term care needed standard were compared between 2009, October and 2006 version. The change and the influence of them were detected by each primary judgment software. SPSS 18.0 for windows was used for the statistical analysis with Wilcoxon singled-rank test.

Results and Consideration:
Total 3.37 minutes needed more time for total long-term care was significantly calculated by 2009, October than 2006 version (p<0.01). The long-care needed levels of the same respondents have been changed with over half coincidence rate the between 2009, October and 2006 versions. The 2009, October version was possible to slightly improve about 20 percent at the long-term care assisted level from 2006 to 2009, October, version, too. At the long-term care needed level 5, the 64.23% coincidence rate of the long-term care needed level was highest. At the long-term care assisted level 1, the 29.73% coincidence rate of the long-term care assisted level was lowest. There were more time and number distribution of the long-term care needed level 5 calculated by 2009, October than 2006 versions. The long-term care needed level was considerably improved in 41.67% of the self-movable dementia. The certification standard for long-term care needed should be constructed by not only the long-term care time but also other factors with the burden or necessity factors for the judgment of the long-term care needed.

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