

Innovation in Health Care for the 21st Century Interdisciplinary Approach to Quality and Risk

Japan Society of Risk Management for Preventive Medicine
Japanese Society for Investigation of Medical Malpractice

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PROSPECTUS

In the 21st century, innovation is taking place in every area of human society. The surprising increase in people's life span has brought about an aging society which requires us to reflect on "the responsibility of the state and its people for life" in industrialized countries like Japan. The central problem is "health care". Preserving good health, overcoming diseases and practicing coexistence are the fundamentals for living. In Japan, with the exception of years when the country was at war, the health care of ordinary people has not been seen as an important task of governments since the Edo period. The only exception is the national health insurance system covering the entire population, which was established after World War II and which Japan is proud of. But today this system risks failure because of extravagance and the introduction of inclusive payment and mixed treatment.

In 19th century Germany, Otto von Bismarck provided the nation with impartial standards of medical practice and made it the government's responsibility to distribute doctors and hospitals adequately, as well as regulating the standards and responsibilities of doctors by law. In this light, present-day Japan lags far behind.

Since 1999, the mass media have steadily brought to public attention a series of medical malpractices, scenes of those responsible apologizing to TV cameras, and criminal actions without principles. More information is thus being disclosed than in the past. Yet accidents involving the medical profession continue to happen on a daily basis. The growing number of law suits for damage compensation is approaching the level in the United States of America. In contrast to the USA, countries in Europe and Oceania regard medical malpractices as inevitable and have devised and are practicing "more effective prevention and solution without disputes" based on law.

Medicine and welfare in Japan will deteriorate through disputes unless comprehensive measures as effective as those practiced in Europe are applied without delay.

Various groups treat medical malpractices in their own way. Lectures and study meetings are held at different locations almost every day. But these will remain merely isolated on-the-spot efforts that fail to reach wider areas and will be viewed as "Cosmetic Compliance" unless they are consolidated, for there are a variety of approaches in the "safety and quality control of health care": basics to practice, and

accidents to damages.

In the near future, the Japan Society of Risk Management for Preventive Medicine (JSRMPM) will be holding its 5th Convention in Osaka, and has requested the co-sponsorship of the Japanese Society for Investigation of Medical Malpractice, which has been active as a peer review organization of medical malpractice for ten years. JSRMPM has also asked the cooperation of the Kansai Risk Management Society, which has been practicing the examination of risk on the spot. This is the result of our reflection that the isolated activities of individual societies to reaffirm their identity is not the best way to improve matters, and that we require interdisciplinary activities to make the meeting effective for the better work tomorrow.

We are trying to launch a new form of academic meeting, setting aside the conventional way of presenting the one-sided views of doctors. Instead, by using the audio-visual method, we hope to make it possible for all those present to obtain facts useful for their future work and to enable the active participation of all members.

We are expecting the attendance of not only members of the medical profession but also those in the health care business, academics, and general public. And we ask for the cooperation of various groups to understand our objectives and give us support.