Fw:東北 Fan Meeting 特別編

震災10年で培った地域を支える健康コミュニティー

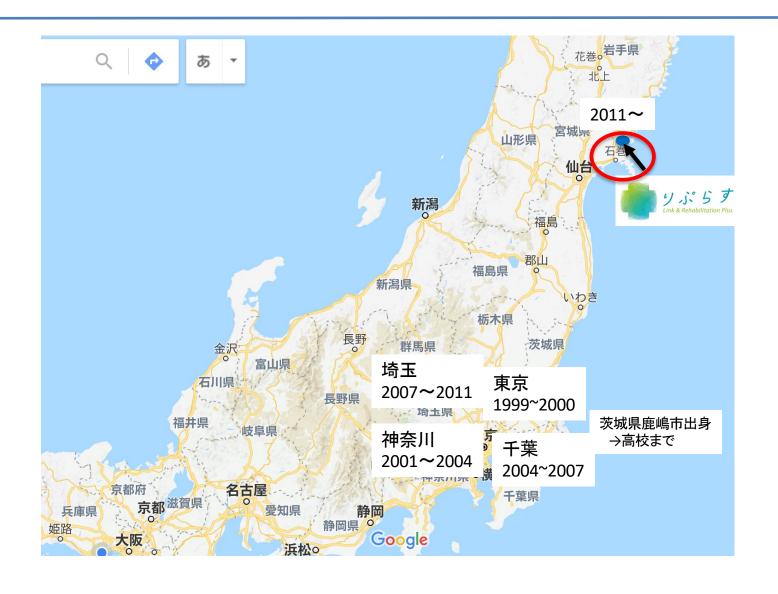
一般社団法人りぷらす



動画(2~3分程度)
 https://www.youtube.com/watch?v=Li6mVgKHFYY

東北に至るまで





自己紹介



出身

• 茨城県鹿嶋市

2011年

- 初めてのボランティア
- face to face 東日本大震災リハネットワーク
- 石巻市へ移住



仕事

- 理学療法士 2007年八千代リハ卒業
- 経営

2013年

• りぷらす創業

趣味

- 野球
- 企てる



活動の流れ



2011年

2012年

2013年

2014年

2015年

2016年

2017年

2018年

2019年

2020年

2021年

5月~支援活動 12月~石巻市へ移住



1月:りぷらす創業

5月:事業(デイサービス)開始



9月~コミュニティーヘルス事業 (旧地域健康サポーター事業)

2019年に活動を住民へ移行

みやぎ生協と協働

4月~仕事と介護の両立支援事業

台風19号

りぷらすの事業の全体像



<理念>

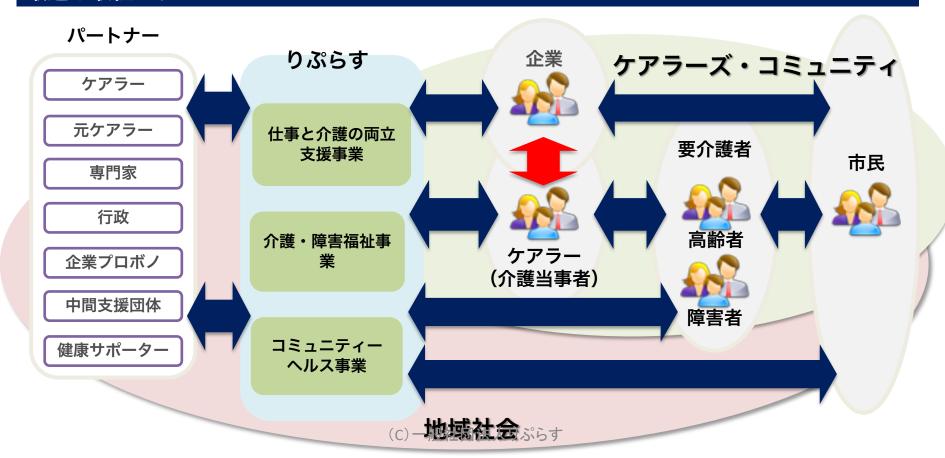
子供から高齢者まで病気や障害の有無にかかわらず地域で健康的に暮らせる社会を創造する

<VISION>私たちの目指す社会

健康的な「ありたい暮らし」をカタチにできる社会を目指す

<Mission>私たちの使命

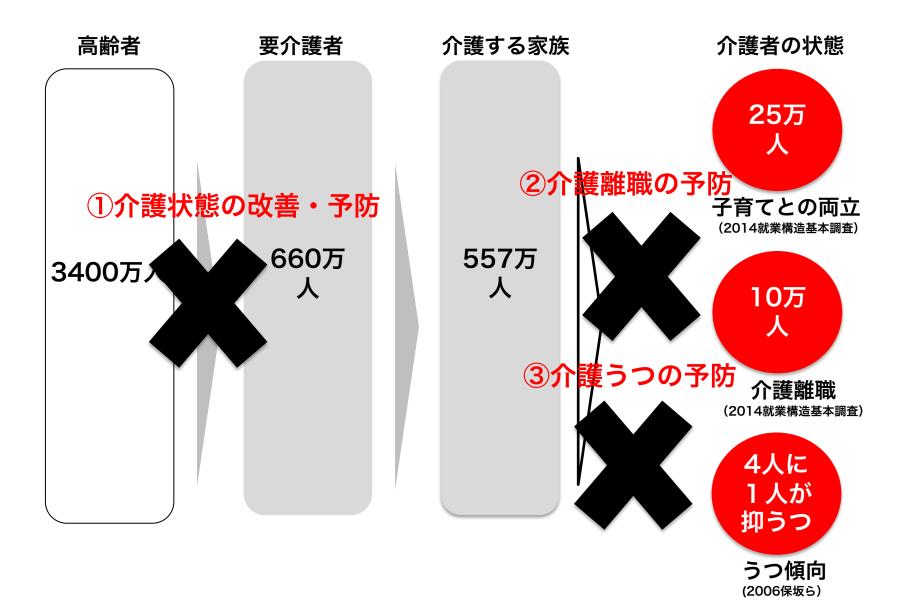
私たちに関わる人々及び私たち自身が、健康的な「ありたい暮らし」をカタチにするために 最適な取組をする



「介護に関する社会的課題」と「りぷらすの事業の関係性」



増大する介護者の肉体的、精神的、経済的不安



介護·障害福祉事業_地域共生







介護・障害福祉事業_介護からの卒業







脳卒中後、家の中で閉じこもり、 寝てばかりいた。 6ヶ月利用し卒業。 卒業後、牛の世話や庭の手入れを。 大腿骨頸部骨折にて退院後、利用開始。 3ヶ月利用し卒業。 自動車の運転、畑仕事、旅行が再開

コミュニティーヘルス事業



おたからサポーター活動とは?

人によって理由は様々 健康づくりはどんな人でも、ご参加いただけます!

- ●自身の健康の課題を改善したい方
 ●健康を増進したい方
- ●地域に貢献したい方 ●時間に余裕があり何か活動をしたい方

例えばこんな方も 50代~60代主婦 民生委員 定年退職後 子育で中の主婦

大学生

行政や福祉事業者が主催する

サポーター養成講座

- ・1時間の講座を1コマとして、1日3コマを4日間実施
- ・講座修了後に 4 回の現場研修実施 (定員は最大 15人)

養成講座

- ・12コマ (座学・演習) ・3時間×4日間で学ぶ ・最大15名程度
- 体力測定

体組成計、握力、 片脚立位、CS30

介護予防総論

地域の現状、 運動・社会参加の必要性

身体の基礎知識

骨・関節・筋肉・ 運動のリスク

体操 14 メニュー

方法・効果・ポイント

グループ発表

伝える経験、交流

現場研修

・現場研修4回実施 ・司会進行、フォローは 先輩サポーターが行う

108

見学・交流

2回目

カラダほぐし体操

3回目 ストレッチ

4回目 筋力トレーニング

【養成講座認定条件】

サポーター

·養成講座: 4日間

認定

·現場研修:4回

【認定後の特典】

- ・ 養成講座学び直し無料
- ・同窓会、勉強会に参加できる ・ステップアップ講座が受講 できる団体『結』の名札と アルバムが授与

おたからサポーター 認定書授与

★自身の健康に興味のある住民が「自分のため」に 講座に参加し、健康に関する知識と技術を習得

★一緒に学ぶ仲間がいて学習・活動意欲が向上 段階を踏んで経験を積むことで活動意欲が向上

健康づくりは、一人ではなかなか長続きしません。

でも、共通の目的や活動があれば、つながりが生まれ、活動の励みになり、楽しくなります。 その結果、活動は継続しやすくなり、活動の輪も広がります。

一般社団法人りぷらすが始めた「おたがいカラダづくりサポーター(略称:おたからサポーター)」 活動は、住民が主体的に健康づくりを継続できるように工夫しています。

おたからサポーター 認定後の活動

住民主体の 団体結成前は 講座主催者主導

同窓会・勉強会

サポーター体力 測定会

身の回りで 体操を実践

おたから健康 体操教室

住民主体の 団体結成と参画

おたから健康体操教室 開催依頼を受けて教室を 実施、参加

同窓会・勉強会

サポーター 体力測定会

身の回りで 体操を実践

ステップ アップ

ステップ アップ講座

- ·認知症予防
- 現場コーディネート •地域診断
- 地域課題を 解決する活動へ
- ★ 講座修了後も住民主体の体操教室に参加し、指導的役割を担いながら 「自分と地域のため」に健康づくりを継続
- ★ サポーターが集まり住民主体のボランティア団体を結成し主体的に活動
- ★「体操の実践者・指導者」としてだけでなく、多様な地域の課題に気づき、 主体的に動ける「地域の担い手」となる

コミュニティーヘルス事業



○ ステークホルダー

行政

地域協働課

介護保険課

健康推進課

- ·講座運営の助成金 · 事業委託
 - (一般介護予防事業等) ・ステップアップ講座

育成と運営

サポート

活動の報告

運営の相談

- ※各支所保健師
- 市の後援 ・広報(回覧など)・住民活動の場の委託
 - (保健、栄養)

地域づくり 関係団体

研究機関

民間企業 (研究部門)

- 講座を受講した 住民に対する 事業効果の検証
- ・企業が持つ、健康に 関する知見の提供

大学

- 講座を受講した 住民に対する 事業効果の検証
- 住民ポランティアの 活動を継続させる 因子の研究

講座の運営主体



一般社団法人りぶらす

- 講座の企画、準備
- 講座講師
- 現場研修の調整
- ステップアップ講座

活動の運営主体



住民ボランティア団体 おたからのわ「結」

- ・地域での体操実施
- ・同窓会の開催
- 現場研修生の育成
- リーダー運営会議

社会福祉 協議会

- ・地域のサロン会への 情報提供や仲介役
- ボランティア団体の 運営のサポート

行政区長 民生委員

サロンでの体操の依頼

NPO団体等

情報誌、新聞への掲載

地域包括

- 講座の共同開催
- ・ステップアップ講座 (うつ、精神疾患) (認知症サポーター養成講座)

精神保健機関

・ステップアップ講座・ステップアップ講座 (誤嚥予防)

摂食嚥下の

福祉・医療関係団体

住民と専門職が共に 健康コミュニティーの仕組みを作る本

~おたがいカラダづくりサポーター養成と4年間の実績~

コミュニティーヘルス事業





11月 12日 休 /2日目

会場 みやぎ生協 桜ヶ丘店 (2階メンバー集会室)

応募対象 30歳以上の個人の方 (1日目/2日目ともに参加可能な方)

共催: みやぎ生協 生活文化部 / 一般社団法人りぷらす

※本事業は「2020年度CO・OP共済地域ささえあい助成」対象事業です 応募方法は裏面参照 →

(9:45~受付開始)







居場所づくり。

お申込み/問い合わせ先

みやぎ生協生活文化部 地域連携活動推進グループ

香 022-218-3880 FAX 022-218-3663 本事業は「2021年度CO・OP共済地域ささえあい助成」対象事業です



課題先進地

少子高齢化

最大被災地

健康状態の悪化・・・

Monday, November 04, 2019

3:00 PM - 4:00 PM



Sign In

Q Search

Browse by Day Browse by Program

Poster Sessions

A Author/Disclosure Index

A Affiliation Index

CE Sessions Handout Index

√ View/Purchase Meeting Recordings - RAMF

S Sponsors

(i) Meeting Resources

3298.0 - Preventive and Rehabilitative Care in Aging Adults for a Healthier Quality of Life (QOL): Potential for Cross-Border Application

园园 园

Abstract

According to the 2017 estimates from the U.S. Census Bureau, the proportion of aging adults has increased, while the proportion of working-age adults is projected to decrease. Providing quality care with limited financial resources for a growing number of aging adults is a challenge in our society.

Replus, a social enterprise, in disaster-affected Japan, provides cost-effective cognitive exercise programs for adults. The methods utilized by Replus has demonstrated successful results in the community, and it would be beneficial to exchange insights with practitioners in the United States to promote healthy lifestyles in the aging community.

Replus services has a positive impact on the economy, community, individuals and families. About 70% of participants in the Replus program have improved their physical function (CS-30 and TUG tests) during the first 3 months after participating. Of the 21 out of 260 participants who receive national long-term insurance, Replus was able to improve their health condition to live without any assistance and services.

If Replus services are implemented on a global scale, this will contribute to a reduction in government spending and encourage physical activity in the aging population. World in Tohoku (WIT), a nonprofit organization in Japan, organizes convenings for

rieitels and temporary housing post-tilsaster increased the likelihood of getting diseases and illnesses, and they required nursing care and rehabilitation. By 2014, those who need nursing care increased 20% in Ishinomaki city (Y2011: Y2014 = 7,149: 8,594).

- 3. There is a lack of knowledge sharing and training towards caregiving in Japan, despite the huge need and expectations for family members to take care of their loved ones. Therefore, the quality of care is often low, and family members who need to leave their job to care the seniors often become depressed and overwhelmed with high pressure and a multitude of
- 4. To contribute the needs of nursing care and rehabilitation. Replus was established in 2013 in Ishinomaki city. The founder of Replus Institution is a certified physical therapist and had assisted rehabilitation of these seniors as a disaster volunteer since 2011. The founder saw that the seniors who lived long in a temporary housing or shelters after disaster tended to repeat falling and hospitalizing due to aspiration pneumonia, and needed the services of Replus. The founder of Replus has focused on two goals on the services:
- 1) To create the rehabilitation services to cope with seniors with different physical problems 2) To increase quality of the services: improvement of their physical conditions and return to their daily routines (graduation from nursing care).

The most popular service has been "day care services" with coverage of the long-term care insurance. The funds of Replus has initially come from donations and the national grant.

身体づくり、 仲間づくり、 居場所づくり。



Regardless of illness or disability, Replus creates a society where all are able to

novation: Creation and growth of organization and individuals amily: Safety of life for families

lealth: For a healthy life of its own there are things that are day-to-day practice osis: Don't exclude. Accept each person. Create an environment where diverse people can live.

ım: three-way good. Aim to be the best and most suitable for the organization, clients, and world (society, community, and future).

Method and Results

Day Care Service Program Outline

Registration: Assessment of client's background: Physical and mental assessment: Verify coverage of insurance

Agreement to the program services/fees; Goal setting (a participant's dream or wishes after the graduation)

Implementation of the services (group program + individual program): depending on nursing care level (1~3)

Evaluation of the physical and living condition; Monthly assessment (Weight, BMI, grip strength, 5m maximum walking, Timed up and go test (TUG), one leg standing time, chair stand test (CS-30)

ible to achieve the goal set by a cipant and improve QOL)

Day Service Program Schedule

8:30am Pick-up a client 9:00 am Vital measurement 9:20 am Program 1 (6 types of group stretch) 10:00am Break

10:10am Program 2 (individual or group training) e.g.) Standing and sitting 30 times x 6 sets

10:50am Break

11:00am Program 3 (individual or group training)

11:40am Vital measurement and break 12:10pm Pick-up

* Total work hours a day: 3 hrs < X < 5hrs * Fees: about 7000ven (the long-term care insurance coverage is 70%~90%- depend on Participants (May. 2013 - October. 2018) Variables N (%) Male=151 (48%)

habilitative Care in Aging Adults for a Healthier Quality of Life (QOL): Potential

11, RDH, EdD, MCHESt, Andrea Lowe, PhD. MPHtt, Mio Yamamoto, MBAttt, Daigo Hashimoto, PTttt

Department of Health and Mental Hygiene, 11 A&E Enterprise Management, LLC., 111 World In Tohoku, Inc., 1111 Replus

Female=163 (52%) Total of the participants = 314 76.9 years old (42yo - 92yo) 40-49: 13(4%) 50-59: 16(5%) 60-69: 16(5%) 70-79: 119(38%) 80-89: 135(43%) 90-99: 16(5%) Average of nursing 2.5

Support level 1: 60(19%)

(Male=10, Female=11)

Multi-generation: 52.9%

Support level 2: 134(43%) Nursing care level1: 44(14%) Nursing care level 2: 60(19%) Nursing care level 3: 16(5%) 15.1 months (2.5 months to 53

Average of the usage peroid months) 260 (82.8%) Program usage > 3 months (N/%) Graduated 21 (8.1%)

Household

participants (N/%)

composition (%)

care support level

Sex (N:%)

for Cross-Border Application

Outline of the long-term care insurance

Target: Those who are over 40 years old, have been diagnosed for the need of nursing care, and approved the eligibility by the Japanese

Single: 11.7%

Seniors: 35.2%

- Fees: only 1-30% co-pay (depending on income). At least 70% of the fee is covered by the insurance
- Services: No restrictions on usage period

Oct vices. No restrictions on usage period			
	Purposes and Basic Policy		
he Long-term are Insurance ct		Independence support	
		social isolation	Reduction of physical, mental burden of the family

Results of graduation

and continue the day care services

and manage the excercise program

and implementing self-excercise trainings.

nursing care.

Example of the graduation (physical improvement)



The results showed that 8 1% of the participants graduated from the

discussion was conducted to know what prevented from achieving

1) The program prevents their social isolation thus they like to stay

The program reduces 'nursing care' by their family members. This

is very important to reduce stress of their family members. They also

3) The participants were not confident to graduate from the program

and they felt that achievement of their goals were still their 'dreams'

for them to improve their phisical and mental well-beings. Therefore,

Community health programs began in 2014 to improve health of all

1. Training of Otakara supporters (Supporters of each other's body

in the community and mobilize the community and empowerment.

building): plan and implement excercise classes in the community

2 Home visit services to assess their health: assess home safety

(living condition), health condition of seniors as well as their family

among family members, prevent isolation from the society, reduction

members, make social service referrals, improve communication

of care burden, assist family members to involve in nursing care,

facilitate to participate in community activities, support of planning

These community health programs have been implemented:

thought that their family mmbers do not need to quit their work for

day care service program by the year of 2018. A focus group

their goals and graduating. The top three responses were:







Improvement of burden

Participation in nursing care Reduction of care Participation in

community Improvment of

3. Work-care balance seminars: the seminars began in 2016 to precent family members' turnover and depression from nursing care. The seminars were held not only inTohoku regions but also in Tokyo. By 2018 more than 250 people participated in the seminars.

Purposes

1.Describe the effective rehabilitative care and services of Replus 2.Describe how local community members can be involved to promote a healthier aging society







Conclusion

- 1. Those who graduated from the day care service program are the model in the community. Their success stories will give a large impact on well-beings of other seniors
- The majority of the participants did not graduate from the dat care service program because other factors such as preventing their social isolation and reducing physical and mental burden of their family members were important and influenced more on their thoughts than achieving thir goals. 3. However, such a program focusing on 'graduation from nursing care' is very rare in Japan and most
- of the seniors also do not think about that when they receive nursing care services. Replus will continue the program with new services and monitor physical and mental health improvements of
- 4. Additional services are especially needed to support those who did not graduate from the day care

Future Plans

- 1. Expand the service areas in Migagi-prefecture (Tohoku region).
- Develop a consulation and counseling guideline for new participants. 3. Invenstigate the roles of participants and increase opportunities for them to play an active role.
- 4. Investigate work and daily activities outside of their homes and day care serices
- 5. Develop a booklet (resource materials) related to launching community-based activities
- 6. Develop leaders of Otakara supporters and implement more trainings of Otakara supporters
- 7. Conduct community-based surveys, trainings and meetings about nursing care and work.
- 8. Collaborate with medical doctors, dentists and other health professionals to provde a bette

災害とリハビリテーション_2019年台風10号







働き方改革







アイの谷プロジェクト 〜地域に愛を、暮らしに出会いを〜

孤立を防ぐ「愛」を

人との「出会い」を



居場所

宿泊/シェルター

産後 ケアハウス

赤ちゃん スペース

デイサービス

多様な 働き方

食堂

訪問支援 センター (配食、訪問な ど)

困りごと相談



地域づくりは自分づくり

自分の地域もどんどん変わっていくから面白い

企てよう