

Analysis on the System of Combination of Medical Care and Nursing Homes in Heilongjiang Province

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ABSTRACT. The medical care for the elderly has always been an important issue in social development. How to ensure the efficiency of medical care for the elderly, the effectiveness of the medical care system and institutions, and how to realize a convenient pension care medical model under big data need not only policy support, but also the experience of all parties. The development of elderly service industry in Heilongjiang province depends on its overall ecological advantages and rich medical resources. The combination of medical care and nursing homes should be realized through benign interaction and common promotion of the government and society. This research follows the research of empirical analysis, analyzing the current situation of medical care and nursing homes in pension service in communities of Heilongjiang province and then exploring the existing difficulties and sorting out the causes of the difficulties, thus proposing the development path of combining medical care and nursing homes in community .

KEYWORDS: Heilongjiang province, Combination of medical care and nursing homes, Home care

1. Introduction

The aging population accounted for 13.51% of Heilongjiang's total population at the end of 2016, ranking first in China [1]. The aging problem is worrying, and pension has become a hot issue of social concern. At present, most of the current old-age care models are the "separation of medical care from nursing homes". Heilongjiang Province has a large aging population and huge demand for supplies and services for the elderly. It is necessary to actively develop the elderly service industry and build an elderly service system that is home-based, community-based, supplemented by institutions and combined with medical care. The aging problem makes it difficult to distinguish the medical needs and old-age needs of the disabled, sick and other elderly people. The combination of medical care and nursing homes is to cooperate and share with hospitals and nursing homes so that the elderly can receive adequate medical care and personalized services [2]. The combination of medical care and nursing homes is embodied in the medical care and nursing work in the process of caring for the elderly. Compared with traditional forms of medical care, the medical assistance is very significant [3], providing nursing services for the vulnerable groups, and offering rehabilitation care, life care, emergency rescue and other services for the disabled and semi-disabled elderly, with a focus on the "old-age model of combining medical care with nursing care". Therefore, it is very necessary for Heilongjiang Province to integrate community resources, integrate medical services into nursing home care, and develop a care model combining medical care and support under the constraints of existing resources and existing systems to alleviate aging problem and meet the needs of the elderly.

2. The Combination of Medicine and Nursing

The "combination of medicine and nursing" originates from the rise and development of integration theory. Compared with "integrated care" with similar meaning abroad, domestic scholars clearly define it as "combination of medical care" [4]. Medical institutions are allowed to provide old-age care services, medical service departments are allowed to be set up in old-age service institutions, and medical and health resources are required to enter old-age service institutions, communities and families. In November 2015, the general office of the State Council forwarded the "Guiding Opinions on Promoting the Combination of Health Care and Care for the Elderly" issued by the State Health and Family Planning Commission and other nine ministries and commissions, making full arrangements to further promote the combination of health care and care for the elderly. In 2017, the "Opinions on Supporting Social Forces to Provide Diversified Levels of Medical Services" and the "13th Five-Year Plan" for the Development of the National Aging Cause and the Construction of the Elderly System were issued. More attention should be paid to the medical care, rehabilitation and physical therapy, disease diagnosis and treatment, hospice care and other professional medical services for the elderly, at the same level as that of regular hospitals. Professional medical service level must be

possessed in the combination of medical care and nursing, which is not the general medical level of taking medicine and injections, but is required to ensure that it is consistent with the level of first-class hospitals [5]. The combination of medical care and old-age care is the integration of medical care and old-age care resources. It provides a new old-age care model integrating medical care, care and life services for the elderly. The core of the combination of medical care and old-age care is cooperation or collaboration.

3. The Current Situation of Medical and Nursing Combination System in Heilongjiang Province

3.1 The Relevant Laws on the Combination of Medical Care and Nursing Are Imperfect

As the main aspect of the contradiction between supply and demand is in the old-age care mode of medical and nursing institutions, for disabled and semi-disabled elderly people who are generally in poor physical condition, the main service object of the old-age care mode of medical and nursing institutions should be this part of the group. If it is difficult to fully cover the traditional medical insurance and old-age insurance in Heilongjiang province, the financial pressure on the elderly population will be too great. Many communities have also summarized home-based care as providing domestic service and daily life help for the elderly, with relatively few services concerning entertainment, leisure, long-term professional medical care, psychological care and emotional comfort for the elderly [6]. Under such circumstances, the traditional old-age care service, which focuses on life care, is also difficult to meet the needs of residents. At the same time, it should be emphasized that Heilongjiang Province's planning for the existing community medical institutions or pension institutions to expand their functions to become community medical, nursing, medical and pension service institutions is also poor. If the hospital is required to provide a certain number of beds, it will not only push the hospital to the legal and illegal frontage, but also greatly affect the health insurance and risk resistance. Most of them appear in the form of government policies and departmental rules, do not have the form of national laws, lack rigidity and binding force, and are easy to produce contradictions in the implementation process, thus greatly reducing the implementation effect.

3.2 Lack of Professional Talents and Medical and Health Resources

At present, the combination of medical care and pension service is the most popular mode at present. There are usually two ways to realize this mode, one is to construct medical service in pension institutions, the other is to extend pension service in traditional hospitals. According to the classification of resources, the resources that can be integrated by the community medical care and pension system can be specifically divided into financial, material and human resources, among which financial and material resources belong to natural resources, human resources and information resources belong to social resources. The inclination of medical and health resources and the flow of talents have a certain tendency, which leads to the accumulation of talents in cities with good economic development and the scarcity of talents in cities and rural areas with poor economic development. Under this background, residents' demand for long-term care services mainly based on the combination of medical care and nursing has increased rapidly. With the increase of income level, the demand for diversified and diversified services has increased, and the demand for service quality has increased [7]. The service personnel are mostly laid-off workers or unemployed residents in the community and other difficult personnel, with low specialization and older age, even if some service personnel have participated in a certain degree of training. At the same time, the private and profit-making nature of the medical and nursing combination institution also hinders the reimbursement of medical insurance or the overall planning of old-age care, resulting in a huge burden on citizens' expenses, etc.

3.3 Lack of Special Supervision System and Institutions

The main reason why it is difficult to combine medical care and maintenance services is the lack of motivation for hospitals to cooperate. Medical insurance also has some "hidden barriers". The medical and maintenance combination institution is managed by three departments: civil affairs, health and medical insurance. If the old-age care mode of combining medical care with nursing care is implemented, it is bound to need to combine the above three departments, resulting in a direct waste of manpower, material resources and financial resources. At present, there are still a small number of medical and nursing institutions in Heilongjiang Province. If only separate supervision is carried out according to the supervision system of medical and nursing care and old-age care, it is inevitable that there will be inadequate and inappropriate situations. The development of industrial resources is mainly based on primary development services, and the degree of integration between industries is not enough. We should create horizontal extension and vertical extension of industrial development, and build echelon development and construction of industrial development. At present, various regions in Heilongjiang Province are implementing the combination of old-age care and medical care, but there are still great deficiencies in the services provided and the designated policies. As

long as many major diseases are properly prevented, they will not develop into major diseases if they are well treated and recovered from childhood. This split and discontinuous service system leads residents to connect different services by themselves when they need medical and nursing combined services, increasing unnecessary costs [8].

3.4 Lack of Funding Sources

The funds invested by the Heilongjiang provincial government and social organizations for medical and nursing services combined with pension services are still insufficient to meet the basic needs of the disabled and semi-disabled elderly. At present, Anshan's pension institutions implement the combination of medical and nursing services through two specific modes. One is to set up medical institutions in pension institutions, which requires raising funds for infrastructure construction. Due to the commonweal and limited nature of medical resources, the current investment in the development of medical and nursing resources in Heilongjiang Province is mainly government investment, with less social investment, imperfect supporting system for industrial development and insufficient social allocation. We believe that "integration of medical and nursing services" refers to the integration of services, in which various professionals cooperate with each other to provide integrated and seamless services for the elderly according to their service needs. And according to the economic development situation, the allocation proportion will be continuously increased. Subsidized investment, subsidized loans and operating subsidies will be given to eligible private medical and nursing institutions. For the elderly with complicated illness and low immunity, many drugs cannot be supplied in the community, and there are not enough beds for transferring to higher-level hospitals. Therefore, whether it is a pension service institution or a medical service institution, capital is a big problem, not only for the allocation of basic medical facilities, but also for the construction of a service environment are very much in need of capital [9].

4. Countermeasures for Accelerating the Mode of Combining Medical Care with Pension in Heilongjiang Province

4.1 To Optimize the Allocation of Pension and Medical Resources

The establishment of an integrated community service system for the aged based on the combination of medical care and nursing needs to be guided by the integration of ideas and policy values. The integration concept runs through the whole system of medical and nursing combined community pension service. At present, relevant laws and policies on long-term care insurance for the elderly should be promulgated as soon as possible to form a sound legal system. Strengthen supervision and management. There are differences in medical level among different levels of "combination of medical care and support" pension service institutions, but the distribution of "combination of medical care and support" pension institutions at different medical levels should be balanced, especially the proportion of "combination of medical care and support" pension institutions with higher medical level should be gradually increased. It is also possible to set up specialized subdivisions in medical institutions or pension institutions, which are mainly used for medical and nursing services. This requires a multi-dimensional and interdisciplinary comprehensive organization to evaluate it. Only in this way can the evaluated results better reflect the actual needs of the disabled elderly. To the greatest extent, through market-oriented operation, a medical and nursing institution should be established, resources from all walks of life should be mobilized to the greatest extent, and various social forces should be assembled to resolve the problem of social aging.

4.2 Establish a Long-Term Financing Mechanism

The main subjects involved in the combination of medical care and support are: medical institutions, pension institutions, community service centers, families and the government. From the practical experience of developed countries, it can be seen that the main policy support for the pension mode of medical and nursing institutions comes from the government, and the main financial support comes from the state's fiscal revenue. The establishment of the elderly individual resource analysis table, with the family as the basic security location, does not need a special medical and nursing institutions, can be timely through the collection and analysis of personal data online and offline. As soon as possible, we will establish a normal operating mechanism for individual contributions, accelerate the pilot work of the "combination of medical care and support" social endowment service financing model, and compensate for the expenses of the "combination of medical care and support" social endowment service for the elderly. In other words, the community medical and nursing integration system should pay attention to the compatibility between the policies and systems formulated and promulgated. We will improve the medical insurance system, expand the coverage of medical insurance, and bring the services of the "combination of medical care and maintenance" pension service institutions into the designated coverage of medical insurance. For those who need to provide long-term care services, they will be transferred to qualified old-age care institutions, nursing homes or the establishment of family sickbeds. At

the same time, they will coordinate the preferential rates at all levels of graded diagnosis and treatment, and guide people to change the concept of going to large hospitals for serious and minor diseases.

4.3 Give Full Play to the Positive Guiding Role of Government Departments

The “green channel” currently implemented in Heilongjiang province can only alleviate the temporary need of the elderly for medical treatment, and it is difficult to actually solve the contradiction between the shortage of beds in large hospitals and the longer hospitalization time of the elderly. Integration of policies in different departments of medical and nursing combined community care for the aged. The medical and nursing combined community pension service system involves the management of various resources and departments such as medical care, pension, finance, culture, land, etc. Without supervision and management, it is easy to lead to policy conflicts and multiple governance. Therefore, it can be said that the combination of medical care and old-age care is a major innovation. It realizes the cross-border combination of medical care and old-age care. Due to the difficulty of implementation, it needs the active participation of the government. The government should increase financial investment to promote the development of home-based care services, formulate relevant policies to realize the combination of medical care and support, improve the medical assistance ability of the elderly, and include the medical service expenses for home-based care of the elderly within the scope of medical insurance reimbursement. Take the community as a small communication point, provide each community with fixed or mobile equipment and professional and technical personnel, and absorb community volunteers and grass-roots service personnel to provide services. Heilongjiang Province should establish and perfect relevant policies and regulations, and also speed up the construction of pension service facilities and establish a social service network covering rural areas.

4.4 Improve the Training System of Nursing Talents and Introduce Medical Social Work

As a new thing, the elderly themselves have a slower recognition and acceptance of new things than the average person. The government should pay more attention to the development of the community pension service combined with medical care and provide guidance education for the elderly. The elderly are the main group of drug consumption. To meet the needs of elderly health care services, we should cooperate with graded diagnosis and treatment to increase the total amount of drugs in primary medical and health institutions. To develop home care, we should pay attention to the role of social workers in home care, especially medical social work. The existing education system in Heilongjiang province can be used to increase the nursing courses for the elderly and broaden the sources of relevant professionals. At the same time, in order to train more and more professional talents, it is necessary to increase investment in training funds. The development of products for the elderly involves all aspects of the life of the elderly, including clothing, food, housing and transportation. Different products should also be developed for different groups of the elderly to meet the diversified needs of the elderly. Therefore, the combination of medical and nursing services is also the combination of medical care, rehabilitation care and long-term care services. The target of long-term care service is determined after the care needs assessment. Constantly improve the public service system of the industrial market, strengthen the service function, and actively provide professional and standardized human resources services for the industry.

5. Conclusion

Old-age care is the guarantee of family happiness and stability, the cornerstone of national dignity, and the combination of medical care and support is a new old-age care model. “Medical and nursing integration” refers to the integration of medical services and care services. A variety of professionals cooperate with each other to provide integrated and seamless services for the elderly according to their service needs. The health of the elderly has been considered as the main evaluation standard of a country or region's happiness index. Different subjects play different roles. The government, institutions and social organizations, as part of the integrated system of community medical care, are indispensable. Due to the multiple management of the government, the road of combining medical care and maintenance, which is already difficult, has become more bumpy. At the same time, medical insurance has also set up some hidden obstacles for the realization of pension in medical care and maintenance institutions. The construction of a combination system of medical care and old-age care with different characteristics to effectively ensure the harmonious relationship between medical care and old-age care is still an important issue to be studied in the future.

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