Research on Status and Solutions of Community Elderly Service in He Bei Province--Take Shijiazhuang as an Example

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Abstract: The endowment service of Shijiazhuang have difficulty in combination of care and support, lack of old-age care facilities and the problems such as disorderly development. So the government should gradually establish a unified industry service standards, phase out all kinds of social medical treatment expenses barriers so as to promote the healthy development of the community endowment service industry in our province.

Keywords: Community Nursing Service, Combination of Care and Support, Nursing Service Industry, A Social Worker

1. Introduction

The population of above 60 years old of Shijiazhuang city has reached 1.3928 million, accounting for 14.08% of the total population in the city. One of the seven people are over the age of 60. According to civil affairs bureau Shijiazhuang, the city's average annual increase people to 69000, by 2015, the proportion of elderly people will reach 15.92%, the elderly population will exceed 1.7 million.¹ Shijiazhuang city endowment service sector, though developing rapidly, can't meet the needs of an aging society.

1.1. The Situation of Home Endowment Service of Shijiazhuang Community

1.1.1. Larger Care Institutions for the Aged, Give Priority to Traditional Care Model

According to Shijiazhuang nursing policy: the government have subsidies for care institutions. New private care agency can take subsidies of 5000 yuan for each bed, each operation beds subsidies to $150 a month; New regional nursing homes (such as district government, the township government's nursing institution) are given 10000 yuan subsidies to each bed, subsidies of 6000 yuan of the reconstruction and [2] in order to stimulate the healthy and benign development of pension services. Therefore, the scale of the nursing agencies are bigger, the number of beds reached more than 100. There are 600 beds and even the least of 50 beds in Shijiazhuang nursing center.

Most nursing institutions admitted self-care, half armor, full protection, intensive care and protection of the old man. But there are still only provide for old man of self-care’s nursing institution, such as state-run Qiaoxi fouche elderly care homes. Nursing institutions mainly provide dietary daily life such as life care project. Operators will provide accommodations, three meals a day care services which can be further subdivided. The old man can buy according to economic ability and demand, for example, the elderly can rent rooms, with nanny stay; can choose to stay in air conditioning room or fan room, etc. Due to various reasons, the general lack of operators, managers and staff of nursing institutions lack of elderly psychology related knowledge, so they are not able to pay more attention to the old man's spiritual life, lack of a people-oriented business philosophy as a result, they old man’s main entertainment are watching TV, singing, dancing and so on a few items. In addition, a variety of special features automatic care bed, intelligent lift toilet, intelligent shower and other modern nursing facilities are relatively scarce,
1.2. The Main Problems of Supply in Community Nursing Service

1.2.1. The Difficulties of Combination of Care and Support

The daily operation of nursing institutions involved in civil affairs, health, medical care departments. Civil affairs department is the business management unit, the health department is responsible for the supervision of nursing quality and health qualification audit, and health care department is responsible for the reimbursement of check and ratify and reimbursement standards, "the tube stand". Nursing institutions only can provide basic nursing services, no more demand of the elderly. They can only gives a body temperature, heart rate and blood pressure measurement and other simple medical services; Medical services with more sophisticated borne by medical institutions and nursing agency cooperation. Most old people of nursing home suffers from various chronic underlying disease, action inconvenience, the body function decline, so they have more demand for medical service. Their medical expenses occupies the most of the elderly daily life cost. Some old men are from the urban and suburban county, medical expenses involved in provincial health care, health care and new farming, different health insurance, but cooperative medical institution may not all can submit an expense account, for the operation management of endowment institutions bring unnecessary trouble.

1.2.2. Community Old-Age Care Facilities can not Meet the Needs of an Aging Society

Nursing institutions infrastructure design should meet the following functions: accessibility, safe, convenient and comfortable. But the facilities of nursing institutions in Shijiazhuang are difficult to meet the above requirements in details. The institutions facilities which run by the local community are humble, lack of barrier-free facilities. For example, the elevator isn't a dedicated elevator, the disabled can't independent operation, etc. There are two reasons, one is the money problem. Lift smart toilet, suitable for operation of elevator for the disabled, medical beds etc cost too much money. Another is that the time of China's entry into an aging society is short, less experienced, the furniture, facilities enterprise on older market development etc are rare.

1.2.3. The Limitation of the Age of Nurse, the Cultural Level and the Income

The old-age care teams include urban laid-off female workers and surrounding suburban county rural married women, mostly between the ages of 40 and 55, generally older,
mostly in elementary school, junior middle school culture level. Old-aged nursing professional education background is short, knowledge structure is not reasonable, legal concepts and some other related knowledge needs to be strengthened. The main reasons of old-age care team general situation are that the staff's social status is low, can not enjoy five insurances, almost no development space but working intensity and the psychological pressure are big, especially nursing senile men and the old man cannot provide for oneself. Once encountering injustice and pressure, they are easy to leave and change. It is difficult to attract young people to join the ranks.

1.2.4. More Government Regulation and Intervention, Less Guidance, in a State of Disorderly Development

Government relevant departments don’t have enough supervision in market access, industry guidance and regulation operation of the aged industry. The industry does not form a unified industry service standards and specification. Nursing industry is in a state of laissez-faire.

Firstly, in the nursing home, there are not only more than 70- years-old persons mostly whose life cannot provide for oneself completely, but also in good health, just turned 60 who don't need to take nursing service for the purpose of taking up nursing home resources in advance. Secondly, individual health care products company, in the name of free health lecture, teaching in "experts" visit, free class, free physical examination and other various forms, seize the old desire to understand psychological health and good health knowledge, to lure the elderly high price to buy all kinds of health care products in high price which don't have treatment function. Thirdly, the larger scale of community nursing institutions often own hundreds of beds. Scale effect improves profit margins. But after check-in, the old men live with strangers so that different habits, dialects causing communication inconvenience and noisy environment can not satisfy the desire of enjoying home-based care and living peaceful life.

2. Countermeasure and Suggestion

2.1. Perfect the Community Health Service Policy, Cancel Kinds of Reimbursement Barriers of Social Security Cost and Unite the Medical Treatment and Endowment

First, community health service centers should play a role in medical service. If the aged prefer home-based care, community health service centers should provide regular health examination service for the aged in there districts, including curing and preventing, so as to make them feel peace at home; community health service centers and medical institutions which corporate with nursing institutions for the aged should create health files for the aged, mastering the situation of the aged who are severe patients and chronic ones; explore ways of building hospital bed at home system. After signing an agreement by the aged and their family members with the community health service centers, centers will send fixed general practitioners to their home for medical care. Establish the system of classified treatment, improve the referral system, treat ailments in community, serious illness at general hospitals; give finance supports to community health service centers which have the hospital bed at home, provide the pension agencies, communities and families with health care resources and change the current situation that hospitals can’t take care of the aged, family doctors can’t treat the patients at their homes and the nursing institutions have no doctors.

Second, lower entry threshold for the health care, realize the whole link supervision and exchange the medical resource and pension resources. The official departments, such as civil affairs, health and health care should set up the mechanism of synergy, provide convenient for the elderly, and unite the medical treatment and endowment, according to the needs of the aged. (1) Lower entry threshold for the health care. The medical institutions, no matter public institutions or private ones, should be included in fixed medical insurance and provide medical service for the aged, if they cooperate with pension institutions in unite the medical treatment and endowment. (2) Strengthen supervision afterwards and punish the behavior which disturbs the order of health care with cruel torture. Doctors and medical institutions, which wind up the medical account with tonic, health care products and other products in stand of medicine, should be punished by canceling professional qualifications and stopping doing business for internal rectification, etc.. (3) Health care for the record registration, provincial, city health care and new rural cooperative medical system, urban medical insurance transfer and settlement systems should be set up. As for the aged, who go to for shelter and receive remote pension, they just need to register in the original medical care sector and receive medical care in current sector. The accounts which meet the Medicare policy can be settled by provincial and municipal health care center new rural cooperative medical centers), according to relevant policy, breaking the barrier of the new rural cooperative medical and urban health insurance.

2.2. Cultivate the Pension Service Industry in Our Province, Guide and Standardized the Healthy Development of Endowment Service Industry

The most important public service of the local government is compulsory education and pension plan. Pension industry is a huge industry chain. There is a great need for the aged nursing service industry, including the aged nursing equipment and service industry, the aged education, the aged traveling and finance and so on. Thus, based on the current situation of community endowment service supply and demand in our province and the social political and economic development in our province, government departments should solve problems from the following aspects, cultivate the pension service industry in our province, guide and standardized the healthy development of endowment service industry

Construct small-scale multi-functional pension institutions, and meet the need of endowment for the aged. Most of the aged prefer hospital bed at home. However, influenced by the
sever policy of long-term birth control, high rate of population migration; it is impractical to realize the wish that all aged people have hospital beds at home. The aged feel difficult to leave their homeland. They want to spend their later years in their familiar communities and the places where they have worked and lived, so small or micro pension institutions, which can provide 10 to 20 beds, are needed to meet the need of the pension service market. Small or micro pension institutions, which cover less area, need less input and have less aged people to take care of, can provide more value added services to meet the personalized need of pension services, according to the specific situation of the community, such as catering services, short-term care services, stay in care services, day care services, and door-to-door services at home.

Second, establish the aged care facilities flow system and change the current situations of old-age care facilities. As more population become old, the more population become empty nester, disabled and semi-disabled elderly, the more aged need special medical care. Facilities, like medical nursing bed, intensive care needs of multi-function wheelchairs, are high-priced durable consumer goods. Because of their specialization, ordinary families will not buy them. According to the principle of public economics, Aged population group health is quasi-public product, which has an obvious external benefit. Protecting the health of the aged is a common responsibility and obligations of the government, society and family. Establishing a facilities flow pension system, which is paid for by the government can be considered. The aged who take the hospital beds at home can apply, once they become disabled in bed, if they conform to the corresponding condition; give back to to government, if they don’t need it and it can be used in next process. the facilities flow pension system funded by the government, make the children take care of the disabled parents, which develop the home care, improve the system of hospital bed service, save the beds in the pension institutions, meet the need of having hospital beds at home and help to reduce the social overall pension costs.

Third, the cultivation of pension care personnel, improve the quality of nursing personnel. Traditional nursing mainly training senior personnel specializing in clinical care, preventive care, nursing management, nursing education and nursing research, and after graduation they can employed in medical institutions at all levels. Traditional nursing students are not engaged in geriatric psychology and geriatric nutrition, they haven’t received these kinds of knowledge and skill lack of experience in care for the elderly, can not adapt to the needs of the aging care. The government should encourage vocational schools and vocational training institutions majoring in nursing care for the elderly, and carry out nursing personnel training in accordance with the elderly people's psychology, physiological characteristics and health demand. Offering courses such as: geriatric medicine, geriatric psychology, elderly care, rehabilitation training and guidance, nutrition and diet, health education, pain nursing and hospice care, safety and protection to meet the market demand and pension services.

Fourth, guiding the aged industry develop healthily, forming the "old age economy"industry based on the old age facilities. With the growing proportion of senior population, there will be more and more government and social capital into all kinds of pension facilities construction to meet the demand of pension services. Pension facilities involving residential design, home furnishing design, catering, nursing and service personnel training and other professional issues. Therefore, the government should actively guide the healthy development of the pension industry so that it can be fine, rigorous and diversity and can drive the development of following enterprise as "elderly supplies Monopoly", "elderly food franchise", "senior management consulting", "pension service personnel training"; gradually form industrial pattern with facilities for the elderly based on “nursing home economy”. (1) Reduce the tax of enterprises which contributes to pension facilities so as to attract social capital. (2) Develop standards related to elderly facilities and pension services, so construction of the endowment facilities center can follow. (3) Nursing staff should follow the scope of labor law, the nursing home should pay five social insurance one housing fund. (4) Strictly regulate health seminars. Health lecturers afterwards inspection is very important, if it is not inconsistent with the examination, directly revoke the business license and the expert lecture qualification, prevent the false lecture through strict rules.

2.3. The Establishment of the Community Volunteer System Combining with “Social Work Integral Bank”, Change the Shortage of the Nursing Staff

The free or low charge service provided by the volunteers will greatly reduce the cost of the community service for the aged. Volunteers face-to-face service can let the elderly people feel warm, may be they will involve in the community volunteers, forming a virtuous circle, promoting the development of the community service for the elderly. The government can encourage enterprises and institutions, primary government, civil society organizations set up community volunteer services, provide training for community service volunteers, so they can master the basic service skills, especially basic medical and psychological education knowledge and skills on nursing, improve the shortage status of pension service industry workers. Volunteers can be vocational and high school students, can also be social idle personnel or the retired old people who are in good health condition.

The establishment of the volunteer system should be based on “social work integral bank”. “Social work integral bank”, Government makes the points standards according to the level and the difficulty of nursing care. When the volunteers providing services in the elderly care institutions, their services content, time and points will be recorded in volunteer’s social work certification. When the volunteers lose their labor ability in old age, they can use the deductible points to reduce the cost of pension services. The
combination of volunteers and integral bank system, encourage social idle personnel and healthy elderly added to the nursing team, providing neighborhood care services for the elderly. It not only solves the shortage of workers, but also lift the worries of the health elderly in the future pension.

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