Research on Theory and Practice of Home Care Model in Shandong Province

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Abstract: as the Aging Population Intensifies Day by Day, the Demand for Pension Services Continues to Grow. in the Process of the Main Body of the Old-Age Care Service Transferring from Family to Society, the Home-Based Old-Age Care Service Came into Being. the Problem of Providing for the Aged is Not Only an Important Matter Related to the National Economy and the People's Livelihood, But Also a Family Matter Related to the Happiness of Every Family and Every Citizen. with the Increasing Aging of the Population, the Whole Society is Facing a Heavy Burden of Providing for the Aged. in This Severe Aging Situation, Shandong Province Should Attach Great Importance to the Problem of Providing for the Aged. According to the Reality of Economic and Social Development, We Should Gradually Implement and Establish a Service System of Providing for the Aged with Chinese Characteristics. Because the Previous Research Conclusions on the Health Status of the Elderly under Different Pension Models Are Not Completely Consistent, Comparing Their Health Status under Different Pension Models is Conducive to Finding Their Existing and Potential Health Problems.

1. Introduction

Home Service for the Aged is the Core and Foundation of the Social Service System for the Aged. Its Theoretical Basis is the Theories of Moderate Inclusive Welfare, Equalization of Basic Public Services and Welfare Pluralism [1]. with the Rapid Development of Our Country's Economy and the Improvement of People’s Living Standards, the Life Span of Our Country's Residents is Gradually Prolonged, and the Problem of Population Aging is Becoming Increasingly Serious. Pension Service is a Common Problem Faced by Many Countries in Coping with the Aging Population [2]. the Problem of Providing for the Aged is Not Only an Important Matter Related to the National Economy and the People's Livelihood, But Also a Family Matter Related to the Happiness of Every Family and Every Citizen. with the Increasing Aging of the Population, the Whole Society is Facing the Heavy Burden of Providing for the Aged, Especially the Increasingly Prominent Medical Problems of the Elderly, and It is Even More Necessary to Face the Double Pressure of Providing for the Aged and Medical Care [3]. Developing the Service Industry for the Aged is an Important Strategic Issue Related to People's Livelihood and is of Great Significance to the Construction of a Socialist Harmonious Society [4]. in Recent Years, Shandong Province Has Insisted on Taking the Needs of the Masses as the Guidance, and Has Made Great Efforts to Build a Community Home Care Service System with Family as the Core, Community as the Support, Information as the Means, Professional Services as the Support and Voluntary Mutual Aid Services as the Supplement [5].

The Current Old-Age Care Institutions Not Only Have Insufficient Beds, But Also Have Low Utilization Rate of Facilities in Long-Term Care Institutions. One of the Most Important Reasons is the Lack of Continuous Service Providers with Professional Care Level and the Lack of Effective Normative Mechanism Supported by Policies [6]. At Present, China's Aging Population Shows a Large Population Base, Fast Growth Rate, Obvious Aging Trend, Increased Risk of Chronic Diseases for the Elderly, and Increasing Demand for Medical and Health Services and Daily Life Care Services [7]. Since the Previous Research Conclusions on the Health Status of the Elderly under Different Pension Modes Are Not Completely Consistent, Comparing Their Health Status under Different Pension Modes is Conducive to Finding Their Existing and Potential Health Problems [8]. as a Developing Country, China, on the One Hand, Completes the Demographic
Transition At a Rate More Than Twice as Fast as That of Developed Countries, But on the Other Hand, It Enters an Aging Society in Advance without the Completion of Modernization and the Well-Being of Its People [9]. In This Severe Ageing Situation, Shandong Province Should Attach Great Importance to the Problem of Providing for the Elderly, and in Accordance with the Actual Situation of Economic and Social Development, Gradually Implement and Establish an Elderly Care Service System with Chinese Characteristics.

2. The Combination of Medical Care and Health Care and the Construction of Health Care Service System

At present, the elderly health service policy is not perfect. Medical institutions and pension institutions are independent of each other. Pension institutions provide pension services and medical institutions cannot provide pension. The overall health status of the elderly aged in institutions is relatively poor and the death risk is relatively high. Family or social support is of great importance in reducing the death risk of the elderly aged in institutions. With the rapid development of aging and the impact of the change of the one-child policy on the family population structure, the old-age care problem, especially the healthy old-age care problem, has become a realistic problem that the whole society has to face. In terms of examination and approval and management of ordinary pension institutions, various departments can basically coordinate their work and do not cross each other. The traditional home care is family care. The elderly spend their old age at home, and their children provide the elderly with care, daily care and spiritual comfort. Medical and health institutions are recognized and managed by the health department, and medical insurance reimbursement is managed by the social security department. The integration of resources required by the mode of combining medical care with old-age care is not a simple addition of the two resources, but the specialized medical resources should be provided to the old-age care field in a hierarchical and diversified way.

Shandong Province has insisted on taking the construction of medical and nursing combined pension service facilities as the key support area for the development of pension service industry, continuously increasing policy tilt and financial support, and encouraging and supporting social forces to participate in the construction process of medical and nursing combined pension service. Unused operators have different overall planning capabilities for resources, which leads to different operation modes. Pension service industry is a kind of public welfare industry, which is very different from the traditional home care model. Generally speaking, the general old-age care institutions are subject to the approval and management of the civil affairs department, and the community home-based old-age care service is organized and implemented by the old-age office [10]. The two-way referral service mechanism between pension institutions and medical institutions has not yet been established, and resources cannot be shared. Once the elderly get sick, they have to commute between their families, medical institutions and pension institutions. The current old-age care model can provide more care, more professional care, rehabilitation care and emotional care for the elderly. There is no established existing model in China to follow and utilize, let alone a unified and successful plan to implement, and the institutional mechanisms of some other developed countries are not suitable for China's actual situation. The characteristics of the project-based service have been obviously improved. We should continuously promote the pension service projects in various places and carry out rational management of the project services.

3. Suggestions on Developing Home Care Work in Shandong Province

Shandong Province already has supporting policy documents specifically aimed at providing for the aged at home, but the relevant policy system and laws and regulations are not in place and perfect, which is difficult to ensure the implementation of the policy. Land acquisition costs for private pension service projects are too high, and the occupancy threshold is correspondingly increased, affecting the supply of pension service facilities. The coverage of the social basic old-age insurance system is small, the rural social old-age insurance is difficult, the medical security level
for the elderly is low, and the service industry for the elderly lags behind, which is not conducive to the implementation of the home care work. Governments at all levels should establish a scientific and predictable concept of combining medical care with old-age care, strengthen policy support system and mechanism innovation, and incorporate the construction of medical care with old-age care service system into the local economic and social development plan. We should encourage the rational transformation of medical resources and pension resources, improve the level of pension services in medical institutions, and set up good medical institutions and medical and health management systems. The government should play a leading role, encourage various social forces to invest their funds in the cause of providing for the aged, vigorously develop the consumption service industry for the aged, meet the service needs of the elderly such as medical treatment, dining and housekeeping in various aspects, and improve the social service level for the aged at home.

Influenced by traditional culture, most old people think that providing for the aged in the family can not only feel the warmth of the family, but also reduce the financial burden on children and individuals. As shown in Table 1, in a survey of 350 elderly people over 60 years old in non-residential care institutions, the elderly people's choice of care methods.

### Table 1 Choice of Elderly Care Options

<table>
<thead>
<tr>
<th>Project</th>
<th>Pension type</th>
<th>Home</th>
<th>Community</th>
<th>Mechanism</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Number</td>
<td>Proportion (%)</td>
<td>Number</td>
<td>Proportion (%)</td>
</tr>
<tr>
<td></td>
<td>186</td>
<td>53.1</td>
<td>38</td>
<td>10.9</td>
</tr>
</tbody>
</table>

In terms of the level of socialized service for the aged at home, the new model requires a higher level of socialized service for the aged at home, but the current service in Shandong Province is difficult to meet the requirements. Influenced by traditional secular ideas, there are few human resources, low quality and few pension services. The pension institutions with strong overall resource planning ability choose to optimize resources through the built-in medical institutions to provide medical and nursing services for the elderly. To increase the ability of institutions to provide for the aged and medical care, it is not only necessary to combine medical care and nursing services in a single institution, but also to promote the reform of joint and interactive institutions for the aged. The community should strengthen the connection, do a good job in the planning and layout of various pension facilities, meet the needs of the elderly at different levels and under different economic conditions, and avoid repeated construction and waste. Due to the shortage of medical resources, the heavy task of diagnosis and treatment, the tense relationship between doctors and patients, and the risk of medical disputes in diagnosis and treatment, the medical institutions with high diagnosis and treatment level and good reputation are lack of motivation to provide medical support for pension institutions. The urban pension service system should mobilize the enthusiasm and creativity of social forces, expand the scope of basic pension insurance, and comprehensively improve the service quality of pension institutions, so as to promote the development of urban pension service combined with medical care.

### 4. Conclusion

With the acceleration of the aging process of the population, more and more elderly people and families begin to choose more institutions to provide for the aged. The choice of the old people's old-age care mode is influenced by many factors. The old-age care mode in Shandong Province is still mainly home care. With the development of the combination of medical care and nursing in our country, the care model for the elderly will certainly show a diversified trend in the future. In terms of the level of socialized service for the aged at home, the new model requires a higher level of socialized service for the aged at home, but the current service in Shandong Province is difficult to meet the requirements. In the supply of home-based elderly care service, the government has authority and system resources, the community has material and information resources, the social enterprise has corresponding market resources, the social organization has a wide range of social capital, and the public has natural emotional resources. The coverage of social basic endowment
insurance system is small, the rural social endowment insurance is difficult, the medical security level of the elderly is low, and the elderly service industry lags behind, which is not conducive to the implementation of home-based endowment work. Urban pension service system should mobilize the enthusiasm and creativity of social forces, expand the scope of basic pension insurance, and comprehensively improve the service quality of pension institutions.

References


