Family-Doctor-Style Pension Service Model Based on the Concept of Health Management

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Abstract: The aging of population will become the norm of human society. Such problems as physical aging, low adaptability, chronic diseases, cognitive decline, changes in emotions and consciousness after retirement, and constraints on economic sources all affect the lives of the elderly to varying degrees. Facing the trend of population aging, it is necessary to take the demand as the guidance, embedding the new concept of health management in the old-age service, taking family doctor system as the main service path and carrier, and build the family doctor-type old-age service model. In this paper, on the basis of summarizing the characteristics of family doctor service, the concept, service content and organizational structure model of family-doctor-style pension service were put forward, and the support of government, resources, concepts and talents needed by family-doctor-style pension service model were also pointed out.

1. Introduction

Population aging will become the norm of human society. Aging and health was the theme of World Health Day in 2012 [1]. The health care of the elderly, the prevention and treatment of geriatric diseases and how to use limited resources to maximize the quality of life of the elderly and reduce the social burden are not only health problems, but also social problems [2]. China is the country with the largest elderly population in the world, with a high degree of aging and rapid growth of the elderly population. And the traditional medical service model can no longer meet the needs of the development of pension undertakings [3]. However, at present, China can't invest as much money as developed countries to solve such problems. We must start from our national conditions, formulate countermeasures on the basis of existing conditions, and find a new pension service mode with "less input and higher output". However, the Family-doctor-style pension service model adapts to this requirement [4].

For family doctors, it is an indispensable link in a sound medical service system [5]. The family doctor system is an effective health management model widely adopted in European and American countries, the health management of which is a beneficial exploration to satisfy everyone's enjoyment of primary health care [6]. Therefore, it is necessary and realistic to explore a health management model with Chinese characteristics and based on family doctor system [7].

Taking the community health service team as the core and signing agreements with the families they serve under the principles of full notification, voluntary signing, free choice and standardized service, family-doctor-style pension service model provides active, continuous and comprehensive health responsibility management services for the elderly [8]. The main content of its services is to assess the health and disease risk of the elderly according to their health status, provide targeted health counseling and guidance, and urge them to take action to improve their health [9]. Family-doctor-style pension service model based on health management can better manage elderly chronic diseases, reduce medical costs, improve work efficiency and the quality of life. At present, facing the trend of population aging, it is an effective choice to combine family doctor responsibility system with old-age service and establish Family-doctor-style pension service model [10].
2. Characteristics of Family-Doctor-Style Pension Service Model

Family-doctor-style pension service is a new service mode for the aged, which has the following outstanding characteristics and advantages: (1) Setting up clinics in the neighborhood of the community, equipping a certain number of family doctors according to the population of the community. Family doctors are required to undergo regular general practitioner education and training, and obtain a general practitioner qualification certificate, so as to ensure the quality of the old-age service, and also save the cost of building old-age institutions. (2) The old-age service provided by family doctors is comprehensive, which can meet the needs of health care, disease prevention and treatment, and psychological counseling for the elderly. Under the guidance of family doctors, the elderly can keep their mood happy and improve their life quality. (3) Family-doctor-style pension service is a more convenient and economical service mode. This mode takes family as the unit to sign contracts with family doctors and adopts the way of annual payment according to family, which can provide convenient, accessible and comprehensive old-age care services for the elderly, solve the problem of "difficult to see a doctor" for the elderly, and form a good industry atmosphere in the community and ensure the income of family doctors.

3. Service Content of Family-Doctor-Style Pension Service Mode

3.1. Health assessment of service objects

Firstly, health records are established for the clients, and health assessment is carried out according to personal health information, so as to realize early detection and treatment of diseases. After that, a tracking health assessment is carried out every year, and a personalized health plan with clear objectives and strong operability is formulated according to the assessment results, so that the clients can keep abreast of their health status and intervene themselves at any time. After the completion of service at the end of each year, the effect evaluation is carried out, and the service plan for the next year is adjusted.

3.2. Health management services for clients

According to the health status of each family and the elderly, timely health education knowledge should be provided for them to achieve early prevention of diseases. Family doctor service centers should be set up, and special telephone and network channels should be opened to enable direct communication between clients and family doctor management centers so that elderly people can consult health knowledge at any time. In addition, according to the health status and health needs of different clients, doctors should actively provide health counseling and classified guidance services to provide professional health guidance for chronic diseases such as diabetes, hypertension, coronary heart disease, stroke, chronic obstructive pulmonary disease and so on. And drugs for such elderly people can be given preferential treatment. For empty nesters or elderly people with inconvenience in movement, doctors can provide on-site services such as physical examination, rehabilitation, nursing and appropriate techniques of traditional Chinese medicine.

3.3. Convenient, comprehensive and inexpensive pension services for the elderly

According to the elderly population in the community, a certain number of general practitioners should be equipped. On the one hand, they can provide convenient and fast elderly health care services for the elderly in the community, so as to avoid some elderly people being tired of rushing and delaying their condition. On the other hand, family doctors provide basic services such as health monitoring, as well as emotional needs such as chat, care and psychological counseling. In addition, for empty nesters and patients with chronic diseases, family doctors should provide corresponding services and guidance, covering physiological, psychological and social aspects. Because the operation cost of community clinics is relatively low, coupled with the inclination of local fiscal policy and certain economic compensation, the fees are reasonable, which reduces the economic cost of old-age care for the elderly.
4. Structural Model of Family-Doctor-Style Pension Service

The structural model of family-doctor-style pension service model based on the concept of health management is shown in Figure 1. Under the policy guidance of the health administration department, the family-doctor-style pension service management center is established, and sub-centers are set up in the lower administrative areas to collect the health and pension needs of the elderly in each jurisdiction, and special telephone and network channels are established with the medical service institutions in the jurisdiction for feedback and application of information. It is necessary to set up an old-age service department in hospitals, which is composed of general practitioners with high quality. Every 5-6 persons are responsible for one community, providing fixed-point services, counseling, education and training services for community families, and comprehensively grasping the health status and various needs of the elderly in the community.

![Fig.1. The structural model of family-doctor-style pension service model based on the concept of health management](image)

5. Suggestions on Building Family-Doctor-Style Pension Service Model

5.1. Strengthen government guidance

To provide policy support and economic input, the operation of the Family-doctor-style pension service model should adhere to the principle of government-led, multi-sectoral participation and multi-joint efforts. On the one hand, family doctor services should be included in the reimbursement scope of basic medical insurance, and the charge gap between medical institutions at all levels should be properly widened, so as to promote and guide the elderly to divert to primary medical institutions, and to make more effective use of community health resources. On the other hand, it is necessary to strengthen the promotion and support of large medical institutions to grass-roots medical institutions, clarify the service objects and scope of family doctors, and realize the health management of family doctors to the elderly in the community. Through the health management services of family doctors to connect communities and hospitals, the gradient pattern of "minor illness in the community, serious illness in the hospital, rehabilitation back to the community" can be truly reflected, and the efficiency of health resources services can be improved.

5.2. Change the concept of old-age care

In order to expand the awareness and influence of Family-doctor-style pension service model, it is necessary to make urban community residents understand the service mode and content of family
doctor-style pension service through vigorous propaganda from the government and all walks of life, so as form a good atmosphere of community family doctor-style pension service, establish a reasonable development plan of family doctor-style pension service model step by step. In addition, medical staff should change from passive waiting for patients to active follow-up and health counseling in the community. People should also establish an accurate concept of health maintenance and actively work with family doctors to maintain their health.

5.3. Vigorously train high-quality practitioners

The lack of family doctors and the low service quality of the practitioners are the bottlenecks that restrict the development of family doctors' service for the aged. Therefore, the key is to actively train a group of high-quality general practitioners. We can encourage excellent medical talents to serve the community by means of directional training. At the same time, it is necessary to strengthen the knowledge training of medical students in doctor-patient communication, health education, health service management and health education for the elderly, to combine clinical practice learning with community practice learning closely, to stimulate the enthusiasm and initiative of family doctor services, and final to provide high-quality old-age services for the elderly. In addition, it is also necessary to set up a preferential employment system for family doctors' pension services and give preferential policies to the contracted family doctors, so as to attract a large number of excellent medical talents to serve the community old-age care.

6. Conclusion

The traditional medical service model can no longer meet the needs of the development of pension undertakings, while family-doctor-style pension service is a new service mode for the aged. In this paper, on the basis of summarizing the characteristics of family doctor service, the content and future development of family-doctor-style pension service were put forward.

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References
