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Research on Current Situation and Countermeasures of Community Health Service in China from the Perspective of "Healthy China"

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Abstract: With the background of the national strategy of "Healthy China", this paper systematically discusses the status quo, problems and countermeasures of community health services in China. With China's rapid economic and social development and the accelerated aging of the population, the health needs of the population are growing, and chronic diseases have become a major threat. Although the state has introduced a series of supportive policies and increased financial investment, community health services are still facing problems such as unbalanced resource allocation, shortage of professionals and uneven service quality. This paper reveals the main challenges of current community health services by analyzing the current status of the policy environment, service provision, human resources situation and information technology construction. In response to these problems, a number of specific countermeasures are proposed, such as optimizing resource allocation, improving service content and mode, strengthening human resource training, enhancing residents' health literacy, and promoting informationization. The study aims to provide theoretical basis and empirical support for the government to formulate scientific and reasonable health policies, to promote the overall improvement of community health service level, and to help the realization of the strategic goal of "Healthy China".

Keywords: healthy China, community health services, service optimization.

1. Introduction

Health is the cornerstone of human social development and an important guarantee of people's well-being. With China's rapid economic and social development and the accelerated process of population ageing, the health needs of the population are growing, and the spectrum of diseases is changing significantly, with chronic diseases becoming a major threat to the health of the population. At the same time, the medical and health-care service system is faced with such problems as uneven distribution of resources, inefficient service delivery and rapid growth in costs, making it difficult to meet the growing health needs of the people.

To address these challenges, the CPC Central Committee and the State Council have attached great importance to people's health and elevated "Healthy China" to a national strategy.In 2016, the CPC Central Committee and the State Council issued the "Outline of the "Healthy China 2030" Plan, which explicitly puts forward the need to "put people's health on the strategic position of priority

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development", and formulated "by 2030, the institutional system for promoting the health of all people will be more complete, the development of health fields will be more coordinated, healthy lifestyles will be popularized, the quality of health services and the level of health protection will continue to improve, and the health industry will flourish". health industry will flourish, health equity will be basically realized, and major health indicators will be among the ranks of high-income countries". The proposal of the "Healthy China" strategy marks a new historical stage in the development of China's health care endeavors, and points out the direction for the reform and development of the medical and health care service system in the new era.

Community health services, as an important part of the medical and health service system, are the first line of defense in guarding the health of residents[1], and play an irreplaceable role in the construction of "Healthy China". Community health service takes the community as the scope, takes the family as the unit, and focuses on residents' health, providing comprehensive and continuous services such as prevention, health care, medical treatment, rehabilitation and health education, which is an important tool for realizing the transformation from "disease-centered" to "health-centered". It is an important means of realizing the transformation from "disease-centered" to "health-centered", a key link in the construction of an integrated medical and healthcare service system, and an important foundation for the promotion of the construction of a healthy China.

2. Status of development of community health services in China under the perspective of "Healthy China"

2.1. Policy environment and institution building

In recent years, the state has attached great importance to the development of community health services and has issued a series of relevant policy documents aimed at promoting the improvement and enhancement of the primary healthcare service system. In 2016, the Central Committee of the Communist Party of China (CPC) and the State Council issued the Outline of the "Healthy China 2030" Plan, which explicitly proposes to "build a multi-level medical security system covering urban and rural residents," and made community health services an important tool for realizing this goal. Subsequently, the Guiding Opinions on Promoting the Construction of a Graded Diagnosis and Treatment System further clarified the key role of community health service centers in graded diagnosis and treatment, and called for the strengthening of the service capacity of primary healthcare institutions and the promotion of the sinking of high-quality medical resources.

In addition, the National Health and Wellness Commission has issued the Opinions on Strengthening the Standardized Construction of Community Health Service Institutions, proposing that by 2025, all urban community health service centers across the country will meet the requirements for standardized construction, so as to comprehensively improve the quality and level of community health services. These policies provide a solid institutional guarantee for the development of community health services, while also pointing out the direction of future development.

2.2. Service delivery

Community health service centers are one of the main places where residents can obtain basic medical services. In recent years, as the State's investment in primary health-care institutions has continued to increase, the hardware facilities of community health service centers have been significantly improved. Many community health service centers are equipped with advanced diagnostic and therapeutic equipment, such as electrocardiographs and ultrasound machines, which are able to meet the diagnostic needs of common and frequent diseases. At the same time, through the application of telemedicine technology, some community health service centers are also able to

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conduct real-time consultations with higher-level hospitals, improving the accuracy and efficiency of diagnosis and treatment.

Preventive health care is an important part of community health services. At present, community health centers generally carry out routine preventive health-care programmes such as child immunization, women's health care and health management for the elderly[2]. In the case of childhood immunization, for example, most areas of the country have achieved full coverage of vaccination, effectively controlling the occurrence and spread of many infectious diseases. At the same time, for the elderly population, community health service centers also carry out regular physical examinations, chronic disease management and other services to help the elderly identify and intervene in health problems in a timely manner[3].

With the aging of the population, there is an increasing demand for rehabilitation care services. Community health service centers are gradually assuming the function of rehabilitation care, providing follow-up rehabilitation guidance and support for discharged patients and the homebound elderly population. At present, some regions have begun to explore the establishment of community rehabilitation centers, equipped with professional rehabilitation therapists and rehabilitation equipment, to provide residents with personalized rehabilitation programmes.

2.3. Human resources situation

The human resources of community health centers mainly include general practitioners, nurses and public health personnel. According to statistics, by the end of 2024, there were about 700,000 GPs nationwide, with an average of about 5 GPs per 10,000 people, but still far below the level of developed countries (e.g., the UK has about 8 GPs per 10,000 people). In addition, the distribution of medical and nursing staff in community health service centers is extremely uneven, with relatively adequate allocations in developed regions in the east and a severe shortage in less developed regions in the central and western parts of the country.

To address the shortage of human resources, the country has introduced a number of policies and measures to encourage medical schools to open general medicine specialties and increase the training of general practitioners, and the Free Training Program for Rural Order-Directed Medical Students, which will be implemented from 2019, enrolls thousands of students each year who are directed to work at the grassroots level after graduation. In addition, localities are attracting talented people to join community health careers by raising salaries and improving the working environment.

2.4. Funding and Resource Allocation

In recent years, the state has been increasing its financial investment in community health services. Data show that the total financial investment in community health services nationwide reached nearly 100 billion yuan in 2024, an increase of about 50 percent from 2016. These funds are mainly used to improve infrastructure construction, purchase medical equipment, and train medical staff. However, relative to the large population base and demand for services, the existing financial input is still insufficient, especially in the less economically developed regions of central and western China, where the funding gap is even more pronounced.

3. Problems of community health services in China under the perspective of "Healthy China"

3.1. Uneven allocation of resources

There are significant regional and urban-rural differences in the allocation of resources for community health services in China. Despite the fact that the total amount of primary health care

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resources has been increasing in recent years, the imbalance in resource allocation remains prominent[4]. Studies have shown that the overall efficiency of resource allocation in community health institutions has been on a downward trend, and there is an imbalance in development between regions, with the eastern region having a relatively high efficiency in resource allocation, while the central and western regions are facing the problems of insufficient resources and inefficient utilization. In addition, the insufficient sinking of high-quality medical resources has resulted in the limited service capacity of primary health-care organizations, making it difficult to meet the growing health needs of the population.

3.2. Shortage of professionals and single service model

The high-quality development of community health services cannot be separated from the support of a professional talent team, but at present, China's community health services are facing problems such as a shortage of talents and an unreasonable professional structure. The number of general practitioners is insufficient, and their technical level is limited, making it difficult to meet residents' demand for high-quality medical services. In addition, imperfect incentive mechanisms have made it difficult for some community healthcare organizations to attract and retain high-quality talent, further exacerbating the talent shortage problem. The imperfection of the talent training system has also made it slow to improve the professional competence of community health service personnel, affecting the overall quality of community health services.

With the diversification and complexity of residents' health needs, there is an urgent need to optimize the content and service model of community health services. At present, community health services are still weak in such areas as chronic disease management, rehabilitation care and mental health services, making it difficult to meet residents' individualized needs. China has a large number of patients with chronic diseases and an increasing demand for rehabilitation care, but the capacity of community rehabilitation services is insufficient, leading to patients' over-reliance on the resources of large hospitals. In addition, community health services are under greater pressure to cope with ageing and the integration of medical care, and the supply of health management and rehabilitation care services for the elderly is insufficient.

3.3. Insufficient participation of the population

The improvement of residents' health literacy is one of the important goals of the "Healthy China" strategy, but at present, the health awareness and self-care ability of Chinese residents still need to be further improved. Some residents do not have sufficient knowledge of community health services, and are not highly motivated to participate in health management, with poor compliance. The role of community health services in health education and health promotion has not yet been brought into full play, and residents' knowledge of healthy lifestyles and their ability to practise them need to be improved.

3.4. Insufficient policy support and synergies

The current health insurance policy focuses mainly on financial compensation for the costs of seeking medical treatment for illnesses, with insufficient support for health management services. This has led to a shortage of funds for community health service organizations to provide health management services, making it difficult for them to effectively carry out preventive services such as health education and chronic disease management. At the same time, the health insurance policy has limited incentives for community health service organizations, affecting their motivation to provide high-quality services. Some organizations may engage in overmedication and irrational use of

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medication in order to obtain more health insurance payments, which not only wastes medical resources but also harms the health interests of residents.

4. Suggested responses

4.1. Optimize resource allocation and improve service quality

A scientific and reasonable layout of service outlets is the basis for ensuring that community health services have wide coverage and high service quality. Detailed planning programs are formulated in accordance with the population distribution and service needs of each region. For urban areas, the number of community health service centers should be increased appropriately, especially in densely populated areas, to shorten the distance residents have to travel to see a doctor and improve the convenience of services. For remote rural areas, the establishment of mobile medical service stations or the use of telemedicine technology can be used to expand service coverage and ensure that every resident can enjoy basic community health services.

Hardware facilities are an important guarantee for the provision of quality community health services. Governments at all levels should increase financial investment in community health service centers to improve infrastructure conditions. They should focus on supporting the purchase of advanced diagnostic and treatment equipment, such as electrocardiographs, ultrasound machines and DR machines, to improve the diagnostic capacity for common and frequent diseases. At the same time, it promotes the construction of smart hospitals, utilizing IoT technology to realize the interconnection of equipment and enhance the efficiency of medical services. In addition, it should also focus on environmental renovation to create a warm and comfortable atmosphere for medical treatment and enhance residents' medical experience.

While increasing funding, attention should also be paid to optimizing the structure of resource allocation and improving the effectiveness of the use of funds. On the one hand, priority should be given to safeguarding the basic operating costs of primary health-care organizations to ensure their normal operation; on the other hand, support for key areas, such as preventive health care and rehabilitation care, should be increased to promote the development of community health services to a higher level. In addition, supervision and management of the use of funds should be strengthened to prevent waste and misappropriation.

In addition to government investment, social capital should be actively encouraged to participate in the field of community health services. Through the PPP model (public-private partnership), enterprises, charitable organizations and other social forces can be attracted to invest in the construction and operation of community health service centers, so as to alleviate the pressure on government funding. At the same time, diversified financing mechanisms can be explored, such as the establishment of community health funds and the launching of public welfare fund-raising activities, so as to widely mobilize all sectors of society to support the cause of community health services. For example, through the introduction of social capital, a place has built a modern community health center, which is not only equipped with advanced medical equipment, but also provides diversified health management services, which are well received by residents.

4.2. Improve service content and mode, and strengthen personnel training

On the basis of providing basic medical services, it further expands comprehensive services such as preventive health care, rehabilitation care and mental health support. For special groups such as the elderly, children and the chronically ill, individualized health management programmes are formulated, and activities such as regular medical check-ups, disease screening and rehabilitation guidance are carried out to improve residents' health literacy and self-care abilities[5]. For example, for the elderly group, services such as chronic disease management and early screening for

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Alzheimer's disease can be carried out; for the children's group, services such as vaccinations and growth and development monitoring can be provided; and for patients with chronic diseases, detailed rehabilitation programs can be formulated and long-term tracking and follow-up visits can be carried out. Through these measures, not only can the health of residents be improved, but their acceptance of community health services can also be enhanced.

In order to better meet the diversified needs of residents, it is necessary to continuously innovate service models. The first is the implementation of a family doctor contracting service system, which provides residents with personalized and continuous health management services through the signing of agreements. The second is the promotion of the "Internet+ community health service" model, which utilizes mobile Internet technology to realize online appointment booking, remote diagnosis and treatment, health consultation and other functions, making it convenient for residents to obtain health services anytime and anywhere. The third is to explore the model of health care integration, combining community health service centers with elderly care institutions to provide a full range of health management and elderly care services for the elderly. For example, a community health service center has cooperated with a local nursing home to establish a combined medical and nursing service system, providing one-stop health management and life care services for the elderly, and achieving good social results.

General practitioners are the core of community health services, and it is essential to vigorously train and bring in high-quality general medical personnel[6]. On the one hand, it is recommended that the Government continue to implement the Free Training Programme for Rural Directed Medical Students, under which a certain number of students are recruited each year and directed to work at the grass-roots level after graduation; on the other hand, medical schools are encouraged to establish general practice specialties and increase the number of enrolment quotas, with a view to gradually enlarging the size of the general practitioner workforce. In addition, continuing education for existing general practitioners should be strengthened, and business training and technical exchange activities should be organized on a regular basis in order to raise their professional standards.

4.3. Enhancement of residents' health literacy and health awareness

Raising residents' awareness of and trust in community health services is an important prerequisite for enhancing service satisfaction. It is recommended that health departments at all levels carry out extensive health promotion and education activities through a variety of channels and forms. For example, they should produce publicity brochures, hold health lectures, and carry out free clinic activities to popularize the functions and roles of community health service centers among residents, and guide them to establish a correct concept of health and take the initiative to make use of community health service resources. In particular, targeted health promotion activities have been carried out for special groups such as the elderly, children and women, with a view to raising their health awareness and self-protection abilities.

Personalized health management programmes have been formulated to address the characteristics and needs of different groups of people, so as to improve the relevance and effectiveness of services. For example, for the elderly population, services such as regular medical check-ups and chronic disease management can be carried out; for the children's population, services such as vaccination and growth and development monitoring can be provided; and for patients with chronic diseases, detailed rehabilitation plans can be formulated and long-term tracking and follow-up visits can be carried out. Through personalized health management, not only can the health of residents be improved, but their acceptance of community health services can also be enhanced.

In order to keep abreast of residents' opinions and suggestions and continuously improve the quality of services, it is recommended that community health service centers establish a sound feedback mechanism. For example, setting up suggestion boxes, opening hotlines, carrying out

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questionnaires, etc., to widely collect residents' opinions and suggestions, and to organize and analyze them in a timely manner. For existing problems, effective measures should be taken to rectify them and continuously improve the service level and residents' satisfaction.

The active participation of residents is the key to enhancing the effectiveness of health management, and residents can be encouraged to participate in health management in a variety of ways, such as setting up health clubs and organizing health competitions, in order to enhance their health awareness and self-management capacity. For example, a community health service center has set up a "health expert" selection activity, which stimulates the enthusiasm of residents and forms a good atmosphere for health management through evaluation and reward. In addition, residents' health data can be recorded through the establishment of residents' health records, helping them to better understand their own health status and formulate personalized health management plans.

4.4. Strengthening informationization and enhancing service efficiency

Electronic health records are an important tool for realizing the comprehensive recording and dynamic management of residents' health information. It is recommended that the construction of a nationally unified electronic health record system be accelerated to ensure that every resident has a complete health record and to realize information interoperability and sharing with medical institutions at all levels. Through electronic health records, doctors can keep abreast of a patient's medical history, examination results and other information, providing strong support for accurate diagnosis and personalized treatment.

The application of telemedicine technology can effectively make up for the shortcomings in the diagnostic and treatment capabilities of primary medical institutions. It is recommended that telemedicine services be promoted nationwide, and that a telemedicine network platform covering urban and rural areas be established to realize real-time consultation and remote teaching between higher-level hospitals and primary medical and health-care institutions. In particular, for the diagnosis and treatment of difficult diseases, remote consultation can be used to allow grass-roots patients to enjoy high-quality expert resources and reduce unnecessary referrals and travel.

As the construction of information technology advances, the issues of data security and personal privacy protection are becoming increasingly prominent. For this reason, it is necessary to establish and improve relevant laws and regulations and management systems to strengthen the management and protection of health information. On the one hand, it is necessary to strictly regulate the operational procedures of data collection, storage and transmission to ensure data security and integrity; on the other hand, it is necessary to establish a sound mechanism for the protection of personal privacy, so that no unauthorized use or disclosure of health information can be made without the consent of the patient, in order to safeguard the patient's legitimate rights and interests.

The construction of smart hospitals is an important way to enhance the efficiency of community health services. It can be used to optimize the processes of registration, payment and medicine collection through the introduction of intelligent management systems, reducing patient waiting time and improving overall service efficiency. For example, a community health service center has realized patient self-service registration, intelligent triage and other functions by introducing equipment such as self-service registration machines and intelligent diagnostic systems, which has greatly shortened patient consultation time. In addition, big data analysis technology can be used to deeply mine residents' health data, providing a scientific basis for the development of public health policies and personalized health management programs.

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5. Conclusion

Community health services, as an important foundation of the "Healthy China" strategy, are of great significance to improving the health of the entire population. Although China has achieved remarkable results in the construction of community health service system in recent years, it still faces many challenges. Through systematic analysis of the current situation and problems, this paper puts forward countermeasures and suggestions to optimize the allocation of resources, improve the content and mode of service, enhance the health literacy of residents, and strengthen the construction of information technology. The implementation of these measures is expected to further improve the quality and efficiency of community health services, meet the diverse health needs of residents, and promote the high-quality development of community health services.

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