

Analysis of the Problem of “Multi-Party Cooperation” in Solving Elderly Care and Suggestions for Elderly Care in China Under the Model of Integrated Elderly Care and Medical Services

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Abstract. Integrated Elderly Care and Medical Services is a multi-faceted combination of medical institutions and elderly care institutions and is an important form of elderly care both domestically and internationally. In recent years, a large amount of literature has shown that research on Integrated Elderly Care and Medical Services is of great significance. This article starts from the perspective of “multi-party cooperation”, points out the development difficulties and shortcomings by listing the relevant practices of the interaction between state-owned enterprises, other related enterprises, and the government, and proposes corresponding countermeasures and suggestions for their future development from different aspects so that all parties in society can better fulfill their social responsibilities. Ultimately, it is possible to sort out and interpret the model of Integrated Elderly Care and Medical Services. The aim is to provide suggestions for improving the quality of elderly care, reducing medical costs, and achieving the long-term goal of healthy aging.

Keywords: Integrated Elderly Care and Medical Services, Elderly Care Issues, Corporate Social Responsibility, Medical Buildings, Smart Elderly Care.

1. Introduction

In recent years, integrated elderly care and medical services have been an important elderly care model at home and abroad. In 2017, China clearly stated an overall plan for building integrated elderly care and medical services, and in the later relevant policies it has been continuously published, “integrated elderly care and medical services” quickly became a research hotspot. During the 14th Five-Year Plan period, under the guidance of the aging national strategy, China made every effort to build and improve a bottom-up, inclusive, and diversified elderly care service system [1]. This article is based on the model of combining medical care and nursing through the management integration of state enterprises in factor markets, the cooperation between the construction industry and retirement and medical institutions, the continuous improvement of ESG investments in pension funds in financial institutions, and the publication of policies these joint effect form “the multi-party cooperation” model. Then, analyzing the problems in the field of elderly care enables all sectors of society to perform their social responsibilities better.

Therefore, this article first focuses on Chinese and English databases such as CNKI and Google Scholar, searching for a combination of “Elderly Care Issues” “Corporate Social Responsibility” “integrated elderly care and medical services” “medical buildings” “smart elderly care” as titles, keywords or excerpts with titles, manually screened 15 articles from 2003 to 2023. Throughout the research process, Song analyzed that state enterprises have many advantages and play an important role in the development of the elderly care industry; Shao & Qiu & Xiao proposed that ESG investment philosophy highly fit with the attributes of pension funds, relevant practices are adopted both internationally and domestically in order to achieve sustainable investment in the elderly care

industry; Zi & Du founded that nowadays the relevant problems and solutions of China's integrated elderly care and medical services model. These documents have important inspiration and guidance for the research in this article.

However, many scholars and their research focus on enterprises in the field of elderly care, fulfilling their social responsibilities from the perspective of integrating elderly care and medical services. Moreover, nowadays, there is no doubt that the integrated elderly care and medical services model is widely applied in the field of elderly care, but it still has many problems and shortcomings; the field of elderly care needs more efficient and comprehensive development. Under this background, the research found that very few scholars have paid attention to how state enterprises, medical construction, financial institutions, and other relevant enterprises, as well as the implementation of government plans that can maximize their value through "multi-party cooperation" in the integrated elderly care and medical services model.

Based on this, attempt to do a system analysis and sort it out. This article takes the perspective of "multi-party cooperation" in the integrated elderly care and medical services model, analysis of typical cases of state enterprises, other relevant enterprises (medical, construction, and financial institutions), and government planning and implementation, identify development challenges and shortcomings, and give relevant suggestions for the future development. This study aimed to provide suggestions for improving the quality of elderly care, reducing medical costs, and achieving the long-term goal of healthy aging.

2. The State Enterprise

2.1. Typical Case of State-owned Enterprises Participating in the Elderly Care Industry

State-owned enterprises are an important part of the elderly care industry as the main social forces. These enterprises have many remarkable advantages, such as funding, talent, technology, etc. It mainly shows in the management and integration of factor markets a good corporate social responsibility figure, a longer ability to withstand funds flow, and so on. Based on this, state-owned enterprises should actively fulfill their social responsibilities in the development of the elderly care industry, explore the model of integrating elderly care and medical services, and make efforts. In recent years, state-owned enterprises have actively participated in the development of elderly care services in various forms [2]. In terms of exploring the model of integrating elderly care and medical services, CITIC Guoan Information Industry Co., Ltd. creates the "Number One City in the World" retirement town in the construction of elderly care communities, which is located in the best area at the intersection of Beijing, Tianjin, and Hebei. They are relying on high-end and high-quality leisure resources, upgrading and improving medical facilities and elderly care services in order to meet the comprehensive physical and mental care needs of the elderly. Persist in the model of integrating elderly care and medical services to truly achieve the goal of "providing care for the elderly, enjoying the elderly, receiving medical treatment for the elderly, and achieving a sense of accomplishment for the elderly".

2.2. Problem and Defect Analysis

However, in the continuous practice and exploration, while producing successful cases, many bottleneck problems also come across that seriously prevent the progress, development, and innovation of the elderly care industry. After research, it was found that the three key issues for enterprises are "emphasizing on hardware over software", "passive transformation", and "complete Westernization".

2.2.1 Emphasizing hardware over software

The emphasis on hardware over software leads to insufficient investment by enterprises in software facilities such as management, services, and psychological care for the elderly, but more emphasis on hardware facilities construction and asset operation [2]. Meanwhile, this approach also directly leads

to high operating costs in the elderly care industry, making it unable to meet the elderly care needs of a large number of elderly people with various consumption levels.

2.2.2 Passive transformation

In addition, some state-owned enterprises participating in the elderly care industry usually undergo “passive transformation” rather than actively proposing to perform their social responsibilities [2]. Therefore, it has a drawback in that it lacks in-depth and systematic market research and strategic analysis. So it leads to unreasonable layout, low service efficiency, and even affected related benefits, resulting in the loss of both positive corporate social image and performance.

2.2.3 Complete westernization

In the process of providing elderly care services, enterprises fail to “adapt to local conditions” and don’t carefully consider their own actual situation, blindly importing relevant foreign technologies, learning from foreign experiences, and even “complete Westernization”. This actually leads to “pushing the seedlings too far”, causing one’s own service management experience and ability to stagnate or even back, resulting in many negative situations.

2.3. Suggestions

In the future, in order to better solve the problem of the aging population, for the stable operation of the social economy, and for the happiness and stability of people’s lives, the country should pay more attention to health issues and elderly care services of the elderly, develop an integrated elderly care and medical services model, use the way of “multi-party cooperation”, focus on cultivating relevant talents, efficiently integrate and use leave unused resources, strengthen supervision of relevant departments, set up specialized consulting service institutions, and support state-owned enterprises in bearing social responsibilities in various ways [3]. Moreover, state-owned enterprises have the responsibility and obligation always to remember they are important social responsibilities, actively strengthen the awareness and understanding of elderly care services, enhance one’s knowledge reserve capacity and level, keep up with relevant national guidelines and plans, enhance the awareness of serving the people and the concept of sustainable development, make sure “adapt to local conditions”, create leading and landmark elderly care services cases and brands, enlarge the influence and appeal of state-owned enterprises in the field of elderly care services, build a good corporate image and make them become an indestructible force in response to the aging population.

3. Other Related Enterprises in the Integrated Elderly Care and Medical Services

This article studies the model of multi-party cooperation among medical, construction, and financial institutions as other related enterprises in the Integrated Elderly Care and Medical Services.

3.1. Medical Enterprises

3.1.1 Typical cases of medical enterprises participating in integrated elderly care and medical services

Medical enterprises refer to enterprises specialized in medical services and the medical industry, mainly involving medical services, devices, pharmaceuticals, healthcare, and other fields. Medical enterprises play an important role in Integrated Elderly Care and Medical Services, and many medical institutions in countries have taken relevant measures to actively respond to the model of Integrated Elderly Care and Medical Services. As for Singapore’s regional health system, in order to reduce excessive hospitalizations and duplicate medical services, as well as improve patient satisfaction, since 2011, it has not only provided internal and cross-departmental care but also launched a transitional care plan for elderly patients and complex populations, combined with a comprehensive health plan and a sound primary healthcare system [4, 5]. The healthcare system and public healthcare system have been implemented, ensuring public health and hygiene [6].

3.1.2 Analysis of problems and defects

In the process of medical enterprises continuously participating in Integrated Elderly Care and Medical Services, they will still be hindered by multiple factors. Medical enterprises may face the problem of insufficient resources, such as a lack of professional technical personnel, doctors, nurses, and related medical equipment in the elderly care industry, which may lead to a decline in the quality and efficiency of elderly care services and fail to meet the needs of the elderly. In addition, medical enterprises pay more attention to medical services, which may lack the professionalism and comprehensiveness of elderly care services. Elderly people require comprehensive care, including life care, rehabilitation care, psychological support, etc. Medical enterprises may not be able to provide comprehensive services, which may lead to psychological loneliness and loss for the elderly. Finally, due to the significant investment in equipment and personnel, medical enterprises usually charge higher fees for participating in elderly care services, which may exceed the economic capacity of the elderly, causing a certain economic burden for the general elderly population.

3.1.3 Suggestions for countermeasures

Nowadays, medical enterprises are still an indispensable part of Integrated Elderly Care and Medical Services. In order to play their role better, enterprises can provide comprehensive medical services, including medical care, rehabilitation, nursing, etc. By cooperating with elderly care institutions, community service institutions, etc., they can meet the diverse needs of the elderly. At the same time, intelligent technologies such as telemedicine, intelligent nursing equipment, and health monitoring systems are continuously introduced to improve the efficiency and quality of medical services, provide more convenient, fast, and accurate medical services for the elderly, meet their medical and nursing needs, and effectively reduce medical costs. In addition, it is also possible to establish and actively participate in demonstration projects for Integrated Elderly Care and Medical Services, promoting the replication and promotion of Integrated Elderly Care and Medical Services and practical experience. In addition, through the implementation of demonstration projects, we can accumulate experience, continuously cultivate talents, explore the best practices of Integrated Elderly Care and Medical Services, and promote them to more regions and institutions.

3.2. Construction Industry

From the perspective of the components of Integrated Elderly Care and Medical Services, it is bound to be affected by construction equipment while exploring its appropriate pattern. Therefore, architects should research the experience, perception, and methods of controlling senior care buildings based on the overall quality of the senior care group. Two ways the construction industry plays a role in Integrated Elderly Care and Medical Services are through elderly care institutions and medical institutions.

3.2.1 Elderly care institutions

(1) Typical cases

As the materials basis of all activities in Integrated Elderly Care and Medical Services mode, equipment and facilities are other technical elements in the usage of space in elderly care buildings. Based on the current literature on the space utilization of elderly care buildings, three types of trends are presented: (1) ‘Diversification’ of space types [7]. With the development of the senior care industry, the categories of its space are increasing, mainly including nursing care, nursing homes, apartments, and daycare. Meanwhile, that needs to be further subdivided into the same category according to the elderly’s self-care ability, specific needs, and other factors. And the types of spaces are also designed and planned simultaneously [7]. (2) “Humanization” of environmental creation and emotional care. Before 2010, there was little research and design on the humanized setting of elderly care buildings in the function of the space of structures. Currently, the thinking about the practice of new construction of senior care buildings and the design of aging-friendly renovations towards ‘humanity’ has become more and more profound. While on the creation of the physical atmosphere infused with more emotional care. (3) The “artisticization” of space aesthetics. As the level of artistic

aesthetic education and the aesthetic appreciation of the whole society continues to deepen, the aesthetic issues of nursing homes have also received more attention. Aesthetics includes not only visual image design, architectural design, etc., in the narrow sense but also the aesthetic refinement of local customs, cultural connotations, etc., in the broad sense.

(2) Problem analysis and countermeasures and suggestions

At present, due to the late start of the practice of resource integration in my country due to the high medical costs and low-quality care caused by the separation of health care and social care in public services for the elderly and with the improvement of social needs for elderly care and the improvement of construction engineering technology, the application of materials Affected by diversification and other factors, the number of space types in senior care buildings is increasing day by day, but the degree of refinement needs to be improved. Therefore, it should be further subdivided according to the different needs of the elderly, and different spaces should be further designed and planned to meet the needs of the elderly groups with different personality characteristics and hobbies. Based on Maslow's hierarchy of needs theory, managers can adjust management service forms and plans in a targeted manner based on the specific conditions of elderly residents [8]. For example, designing some halls to target the phenomenon of more women, more party members, and more highly educated elderly people to carry out the study of party history, the spirit of important speeches, and current affairs news; to hold reading clubs and poetry recitals, so that the elderly can keep pace with the times and be edified. Sentiment and enrich their spiritual life. In addition, more in-depth thinking should be integrated into the aspects of light environment, acoustics, tactile perception, color atmosphere, etc., in senior care buildings. At the same time, the customs and culture of the target construction area should be investigated, and the aesthetics should have both local characteristics and cultural connotations, innovative practices, etc.

3.2.2 Medical buildings

(1) Typical cases

Medical intelligence is an important development trend in medical buildings [7]. Internationally, there has been a focus on remote services and on-site elderly care models, such as the UK's provision of remote home care services, which enables remote physical examinations, dining, drinking water, and medication reminders [9]. In addition, Ali Dharma Institute, together with research teams from more than 10 medical institutions around the world, has achieved the screening and cure of pancreatic cancer through "plain CT+AI", which is the first time that humans have the means to screen early pancreatic cancer on a large scale, and it is also great progress of intelligent elderly care [10].

(2) Problem analysis and countermeasures and suggestions

Both abroad and domestically, there are shortcomings in the overall development of smart elderly care. In foreign countries, the lack of care for the elderly in smart cities has led to a lack of attention to "smart elderly care" and has not yet become a mainstream issue. In addition, elderly people's concerns and inadequate adaptation to intelligent technology and new data, as well as their lack of learning ability, can pose certain obstacles to the development of smart elderly care. At the same time, smart elderly care will bring high expenses, and the costs have not been reasonably optimized, which may exceed the economic capacity of the elderly and cause certain burdens. Products and services may still have design defects, and data collection and analysis techniques require further iteration and upgrading. The above issues also need to be noted domestically. In addition, China's smart elderly care is still in the early stages of development due to its short duration and lack of targeted policy guidance and social support. There are also problems with improper operating models and uneven resource allocation in industrial development, which require more support and investment.

To solve the problems of smart elderly care, it is necessary to avoid broad and hollow policies, provide targeted policy guidance, and continuously optimize and introduce relevant laws and regulations, which will help to improve the overall environment of smart elderly care continuously. At the same time, it is necessary to follow up and optimize the innovation environment and product application environment for smart elderly care based on the needs of the elderly themselves, with the elderly as the center, strengthen the humanization of the elderly care model, and provide personalized

services according to the individual needs of the elderly, including dietary health management, medical care, etc. In addition, multi-departmental collaboration can be strengthened further to optimize the “smart elderly care” policy. Elderly care is not only related to the medical sector but also closely related to various departments such as civil affairs, health, emergency response, human resources and social security, and transportation. It is necessary to combine the cooperation and joint efforts of multiple departments to achieve the maximization of efficiency in smart elderly care. At the same time, it is necessary to conduct necessary research, specific inquiries, and surveys on the needs of the elderly and attempt bottom-up policy formulation to improve the inclusiveness and comprehensiveness of policies. Finally, a multi-level and comprehensive network system can be constructed to improve elderly care services, including community elderly care centers, home-based elderly care services, etc., to meet the different stages and needs of elderly care services.

3.3. Financial Institutions

3.3.1 Typical cases

The practice of financial institutions participating in Integrated Elderly Care and Medical Services mainly focuses on the relevant aspects of pension. Nowadays, both internationally and domestically, the focus is on sustainable investment in pension ESG. Among them, the Norwegian sovereign pension fund actively implements and strengthens negative screening, eliminating companies that produce tobacco and weapons and engage in misconduct. The Japanese government’s pension investment fund actively participates in women’s empowerment index investment, advocates gender equity, and expands the social impact of ESG [11].

3.3.2 Problem analysis and countermeasures suggestions

At present, although relevant policies have been introduced for ESG investment in China’s pension system, it is still in the initial exploration stage, with a relatively small investment scale, and facing some difficulties and challenges. There are mainly (1) insufficient guidance and incentives, as the government has failed to provide targeted and effective guidance, and the proportion of green investment and sustainable investment is relatively low, which limits ESG investment to a certain extent [11]. (2) It is difficult to establish suitable investment standards and strategies, and various assets have different focuses on ESG factors. At the same time, ESG rating standards are not uniform, making it impossible to apply international standards directly. (3) ESG information disclosure is incomplete, and the information awareness of various enterprises is not strong. The channels for obtaining information are single, insufficient, and have a strong lag, and the database is not yet sound [11]. (4) There is insufficient talent reserve, a lack of professional talents in the ESG investment field, and a lack of relatively rich operational experience.

To achieve sustainable investment, financial institutions need to combine international and domestic experience to improve ESG investment in pensions continuously. Internationally, some enterprises mainly use institutional systems to promote the development of pension ESG investment, strengthen capital operation management, diversify the selection of pension ESG investment strategies, improve the investment system, realize the long-term value of pension ESG investment, and continuously promote ESG concepts and create a good investment atmosphere [11]. Financial institutions can learn from international experience and combine it with their own actual situation to continuously improve it and strengthen policy guidance in order to expand the sustainable investment space for pension ESG. In addition, it is necessary to continuously improve relevant laws and regulations as well as information communication channels, laying a solid foundation for sustainable investment in pension ESG. At the same time, talent is also an essential factor and link in ESG investment. Therefore, it is necessary to accelerate the construction of the pension ESG talent team, strengthen the training of professionals, and build an ecosystem suitable for sustainable pension investment.

4. Government Participates in Macro-control

The government indirectly promotes multi-party cooperation by adjusting the proportion of pension insurance and intensifying the revision of talent training plans.

4.1. Cooperates with Construction Industry through the Adjustment of Pension Insurance Ratios

4.1.1 Typical cases

“Cooperation” between the Japanese government and nursing care institutions (nursing care facilities for the elderly). Since the implementation of Japan’s Nursing Care Insurance Act in 2000, 90% reimbursement of nursing care fees is available to the elderly; as a result, individuals only need to pay 10% of the fees, which greatly reduces health care costs for individuals. In this way, the government subsidy mechanism has led to the majority of Japanese nursing homes being nursing care facilities. In addition, the Japanese government mainly promotes small-scale but multi-functional community-based nursing homes instead of large ones. That is generally with less than 100 beds, making it easier to achieve refined management and thoughtful care services in nursing homes [12]. In the same year, the Japanese government began to implement the long-term care insurance plan (LTCI). The insurance providers are local municipalities and special administrative regions. The insureds are all older than or equal to 40 years old. They are divided into 2 groups. The first category is the elderly, who are 65 years old and above, while the second category is 40 to 64 years old [13]. After the insured submits an application to the local municipal government and then obtains the proof of long-term care needs. The long-term care costs for the elderly are paid according to the model of ‘50% premium + 50% public funds’, where premium = 25% central finance (5% to make up for bridging the financial gap between cities) + 12.5% local finance + 12.5% local government fund expenditure [14].

4.1.2 Problem analysis and countermeasures and suggestions

In the current context of insufficient health and medical resources in China, grassroots community health service institutions and the elderly care institutions they host cannot be recognized as the same medical insurance designated institution. In that case, patients are not able to use the same medical insurance code to settle medical expenses. It can be seen that a few problems with the standards and conditions for medical insurance settlement and reimbursement are inconsistent, such as its clarity and blocked paths [8]. In order to cater to the demand of the long-term care needs of the elderly, China should vigorously promote the integration of cost settlement between medical institutions and elderly care institutions. Regarding issues such as the inability of some rehabilitation and nursing projects to be included in the scope of medical insurance reimbursement, which has largely restricted the development of integrated medical and nursing care institutions, it is recommended to try to broaden the medical insurance policy. In addition, so as to establish a multi-level long-term care security system, a reasonable approach to tackle this issue could be to continue exploring the establishment of a nursing insurance system.

4.2. Supplement New Workforce with Integrated Medical and Nursing Care Service Institutions by Stepping up Talent Training Plans

4.2.1 Typical cases

Nursing staff are of great significance in supporting the development of the combined medical care and elderly care service industry. They have a high understanding of medical care services and have mastered a variety of professional knowledge and skills. In this field, The United States has accumulated rich experience in dealing with the problem of population aging and providing elderly care services. Home-based elderly care services in the United States are gradually enjoying a high reputation among the independent American people and are becoming one of the main forms of elderly care services. According to incomplete statistics, out of consideration for elders’ health and

service needs, 5% to 7% of the elderly in the United States currently live in nursing homes, while the rest choose community or home care. These even give birth to an emerging profession called “caregiver” [12]. What’s more, combining medical care and nursing care with the construction of a talent team can also solve the social problems of employment difficulty.

4.2.2 Problem analysis and countermeasures and suggestions

Nowadays, the age of nursing staff in China is rather large, and their educational, technical levels and service capabilities are uneven. Hence, it is necessary to strengthen professional skills training and promote professional skills identification for nursing and other occupations [15]. Additionally, the government needs to strengthen the construction of talent teams and step up training programs for in-demand talents such as geriatric medicine, rehabilitation, and nursing staff on account of the current scarcity of medical personnel in China’s elderly care institutions. Normative mechanisms such as care connotation, service standards, and quality evaluation also need to be improved. The establishment of professional courses in schools can support it. Strategies to enhance X might involve: a) strengthening the professional development of nursing service practitioners in nutrition, psychology, and social work. b) cultivating a team of professional nurses and integrated talents, consistently adding new forces to integrated medical and nursing service institutions.

5. Conclusion

Generally speaking, the examples of how to effectively respond to my Chinese population’s aging are related to the overall development of the country and the harmony and stability of society. This article has formed a “multi-party cooperation” model among different social components for the purpose of improving the quality levels of care for the elderly, reducing medical costs, and achieving the long-term goal of healthy aging. From the perspective of the state enterprises, they should actively improve their understanding of the elderly care service industry through the management integration of factor markets. It encouraged the author to do more in-depth research on certain professional fields of elderly care at the same time. Besides, it strengthens awareness of service and innovative spirit as well. Thus, it creates a representative and leading elderly care service brand. Medical companies ought to meet the diverse needs of the elderly through cooperation with elderly care institutions, community service agencies, etc. From the standpoint of the construction industry, on the one hand, in cooperation with elderly care institutions, it is necessary to establish further planning and design for different space types in order to satisfy the needs of elderly groups with different personalities and hobbies. Deeper thinking should be invested in all aspects, with the aim of fulfilling the demands of the elderly, including aesthetics based on local customs and cultural connotations and innovative practices implemented. On the other hand, in the cooperation between the construction industry and medical institutions, multi-department collaboration and research on the needs of the elderly are supposed to be strengthened to optimize “smart elderly care” Policies. From the angle of financial institutions, this paper suggests improving ESG investments continuously in pensions and relevant policies based on international and domestic experience. Finally, in regard to microscopic views, the government advocates adjusting pension insurance ratios and stepping up modifications to talent training plans with the goal of promoting “multi-party cooperation” indirectly.

This article is based on research on elderly care issues and promotes the solutions to the problems of unbalanced and inadequate development of medical and nursing care in China. From the perspectives of the state enterprises, medical care, construction, and financial institutions under the macro-control of government, this paper aims to improve the quality of elderly care and reduce medical costs. It provides recommendations for achieving long-term goals of healthy aging. However, since most of the data sources in this article are existing secondary data, there are still some limitations. In the future, we can design experiments to focus on the target elderly group, collect data, and analyze the concrete needs of certain groups to deepen the research on elderly care issues and provide advice on elderly care.

Authors Contribution

All the authors contributed equally and their names were listed in alphabetical order.

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