

# Research on the Development Path of Rural Medical and Health Services under the Strategy of Rural Revitalization

-- Take Feixi County, Anhui Province as an Example

Weilin Zhang<sup>1,\*</sup>, Yi Ding<sup>1</sup>, Wenjie Yuan<sup>1</sup>, Kun Zhang<sup>1</sup>, Zejiang Zhou<sup>2</sup>

<sup>1</sup>School of Finance and Public Management, Anhui University of Finance and Economics, Bengbu, Anhui, China

<sup>2</sup>School of Economics, Anhui University of Finance and Economics, Bengbu, Anhui, China

\*Corresponding author: Weilin Zhang (Email: 2282404261@qq.com)

---

**Abstract:** This paper mainly studies the path of rural medical and health service development under the strategy of rural revitalization (taking Feixi County as an example). This paper uses quantitative investigation, qualitative investigation, literature research, regional difference analysis, dynamic analysis and other research methods, and through field practice and data analysis, puts forward some solutions and innovative programs for the problems in the development of medical and health care in the region.

**Keywords:** Rural revitalization strategy, Rural medical treatment, Development path.

---

## 1. Introduction

The report of the 19th National Congress of the Communist Party of China clearly put forward the strategy of "rural revitalization", and farmers should be the main actors in the report. We will improve public services at the grassroots level and promote the modernization of agriculture and rural areas. Adhering to the dominant position of the people, on the premise of the development of rural medical and health services, it is manifested in improving the rural medical and health system, promoting the construction of a healthy countryside in the context of the rural revitalization strategy, improving the corresponding medical and health service policies, maintaining the health of rural people, and realizing the prosperity of the country and the people. The General Secretary also stressed that people's health is the main goal of the country's prosperity and strength. We should improve the corresponding current medical service policies and achieve the overall goal of making people rich and powerful. Medical service is a key component of grass-roots public cultural services. Therefore, the level of rural medical and health services has a key practical significance for improving the physical and mental health of rural population, persisting in the influence of people's actors, promoting the overall development of rural areas, and strengthening the implementation of the rural revitalization and development strategy.

Under the background of rural revitalization strategy, the government has put forward new requirements for the development and construction of rural medical and health services. However, at this stage, the rural medical and health service mechanism does not fit well with the strategic objectives of rural revitalization. Therefore, it is necessary to actively explore the development path of rural medical and health services under the rural revitalization strategy. By further improving the medical and health service mechanism and medical and health security mechanism, innovate the development path of health services, build a network of basic

medical and health service systems, solve the problems and shortcomings in development, better respond to the development of rural revitalization strategy, and promote the deep integration of rural medical and health service development and rural revitalization strategy.

Feixi County is located in the middle of Anhui Province, adjacent to the provincial capital. The county government is only 7 kilometers away from the political and cultural center of Hefei City, with a favorable geographical location. There are four railway lines in the county, and two expressways pass through the county, so the location is superior. Meanwhile, Feixi County was elected one of the top 100 counties in China in 2010. The per capita income level is in the forefront of Anhui. However, as a county seat, Feixi County still has a large gap in its medical and health service capacity compared with the city center. Due to the lack of basic medical and health service capacity, plus the advantages of local geographical location, along with socio-economic development, people's living standards have improved, local patients will be more inclined to urban areas or even areas with higher medical service capacity outside the province when choosing medical and health care. In this case, it will not only lead to the waste of medical and health resources already invested in the local area, but also increase the pressure on medical and health services outside the region, making the capacity and investment of medical and health services more unbalanced.

Based on the rural revitalization strategy, this paper finds the advantages and disadvantages of the current rural medical and health service development from multiple perspectives, analyzes the root causes and points out the corresponding solutions, and explores the development path that conforms to the rural revitalization strategy and practical needs.

## **2. The Practical Significance of the Rural Revitalization and Development Strategy for the Progress of Rural Diagnosis and Treatment**

China is a large agricultural country. Improving the rural medical service security system is a key component of promoting the development of modern agriculture and building a new socialist countryside. Since the end of the 20th century, the development of rural medical and health services in China has made great progress: On September 2, 1992, in order to implement the spirit of the Eighth Plenary Session of the 13th CPC Central Committee and the General Office of the State Council, the formulation of the Decision on Further Strengthening Agriculture, Animal Husbandry and Rural Work was the beginning of strengthening the leadership of rural medical and health and the foundation of doing a good job in rural health work. Then, under the leadership of the CPC Central Committee, China adopted a series of measures to consolidate and improve the rural health service system, including the establishment of the "new rural cooperative medical system" and the implementation of the "10000 doctors to support the health project". It has made all-round progress in rural agriculture and all-round development of farmers. At the same time, it has laid a solid foundation for promoting rural intelligence in agriculture and animal husbandry.

In the report of the 19th National Congress of the Communist Party of China on October 18, 2017, the General Secretary clearly put forward the "rural revitalization and development strategy", which further clarified the main ways and means of rural revitalization in China. It has consolidated the way forward for the development of agriculture and rural areas. The prominent problem of solving the "two worries and three guarantees" proposed in it is the focus of agricultural and rural farmers' rapid development, and medical and health security is the most important. The planning strategy for rural medical security is not only conducive to improving the national health level of China, providing a fundamental guarantee for China's long-term sustainable development, but also conducive to the completion of the overall goal of China's social and economic development. The report of the 16th National Congress of the Communist Party of China clearly stated that in the first two decades of the 21st century, most of them should take multiple measures to build a well-off society in an all-round way with higher quality and benefit more than one billion people. Therefore, the establishment and improvement of the medical insurance system is conducive to improving the quality of life and physical and mental health of farmers. Promoting rural areas is the social and economic development and social development, stability and unity. Aiming at the overall goal of building an all-round well-off society in China, promoting the intelligent process is of great significance.

The CPC should further strengthen its all-round leading cadre function in rural grass-roots party building, actively safeguard the legitimate rights of Chinese citizens, and increase the promotion of basic medical knowledge of the current rural population. Local and municipal governments should strengthen the construction of rural medical and health teams, encourage county and town medical and health workers to participate in and further study, create a

corresponding rural diagnosis and treatment development trend system and improve the rural medical and health service capacity, and ensure the rational implementation of rural revitalization.

Reform and innovate the rural medical and health management mechanism independently. Create an operating mechanism with orderly standards and established responsibilities to ensure the progress of diagnosis and treatment. County and city level environmental health is the key to rural disease prevention and treatment, basic medical care, medical treatment at the bottom, rescue, and specific guidance for environmental health technicians at the bottom. The village clinic is responsible for public health management. Provide comprehensive prevention, health care and basic health services. The health center is responsible for disease prevention and treatment, and provides early and intermediate diagnosis and treatment of common diseases.

Government departments should try their best to reduce farmers' medical expenses. With the implementation of the rural medical cost guarantee mechanism, the drug taking cost of rural households should not be too high relative to the rural per capita income, and should be reduced to an effective level as far as possible, so that the rural areas continue to improve the rural drug supply Internet and control the Internet, reduce the stage of drug flow, strengthen drug supervision and management, standardize standards, further improve the rules and regulations of drug bidding and procurement, and reasonably reduce drugs. Third, priority should be given to providing assistance to rural households in need. Precision poverty relief hospital wards should be set up in provincial, municipal and county tertiary tertiary hospitals according to a certain proportion, so as to increase the scope of assistance and ensure that the low-income groups and rural poor households can afford to get sick. Only in this way can we accelerate the various undertakings in the countryside, the all-round development of farmers and the intellectualization of agriculture and animal husbandry in the countryside.

China is a big agricultural country. Improving the rural medical and health security system is a key component of promoting the development of modern agriculture and building a new socialist countryside in China. Since the beginning of the 20th century, China's rural medical and health work has made great progress: on September 2, 1992, in order to implement the important instructions of the Eighth Plenary Session of the Thirteenth Central Committee of the Communist Party of China and the Notice of the General Office of the State Council to the Ministry of Health and other units on Reform and Innovation and Strengthening Rural Medical Services, The Circular of the General Office of the State Council on Submitting the Request Report on Reform and Innovation and Strengthening Rural Medical and Health Work to the Ministry of Health and other units was formulated, which is also the beginning of strengthening rural medical and health leaders and improving rural environmental health work. Then, under the leadership of the Party and the state, China adopted the rules and regulations of "new rural cooperative medical care", and implemented a series of measures to promote and improve the rural environmental health security system, including the "ten thousand doctors for health project". It has laid a solid foundation for the all-round development of rural undertakings and farmers, and accelerated the modernization of agriculture and animal husbandry in rural areas.

On October 18, 2017, the General Secretary clearly pointed

out the "strategic plan for rural revitalization and development" in the report of the 19th National Congress of the Communist Party of China. It further clarified the main ways and means of rural revitalization in China, and compacted the road ahead of the rural development trend of agriculture and animal husbandry. Among them, dealing with the obvious problems encountered by "two worries and three guarantees" is the key to the great development of rural farmers in agriculture and animal husbandry, and medical and health care is the top priority. The overall planning countermeasures of rural basic medical insurance are not only beneficial to the improvement of the national health level, but also provide fundamental guarantee for rural basic medical insurance.

Make full use of the leading role of farmers in rural revitalization to stimulate farmers' innovation ability, initiative and consciousness. And then accelerate the implementation of the rural revitalization and development strategy.

### **3. Analysis of Rural Medical and Health Services in Feixi County**

#### **3.1. Development status**

(1) By the end of the 13th Five Year Plan, the natural birth rate of the county population was 10.94%, the maternal mortality rate was 0/100000, the mortality rate of children under 5 years old was 2.69%, the infant mortality rate was 2.09%, and the average life expectancy was 79.4 years. 3.4 years older than the end of the 12th Five Year Plan period; The county has 376 medical and health institutions, including 3 county-level public hospitals, 4 public health units, one medical service project, 12 village clinics, 200 village clinics, and 156 private medical institutions. Each thousand people have 3.8 beds, 1.9 doctors and 1.8 registered nurses.

(2) The reform of the medical system was pushed forward again. During the "13th Five Year Plan" period, capital investment has gradually increased, equipment infrastructure has significantly accelerated, and personnel training has steadily increased. The construction of a compact medical community has been gradually improved. The clinical pathway and hierarchical diagnosis and treatment work have been implemented in an orderly manner. The quality of medical services has been steadily improved. The supervision of drug consumables procurement has been further strengthened. The information management of health services has been further strengthened.

(3) We will comprehensively implement the construction of healthy Feixi. Comprehensively implement the construction of "enriching the western region with physical and mental health", establish the core concept of "big health industry, big environmental health", take people's health as the core, promote the integration of medical and prevention, carry out health education knowledge and health education, and promote the basic construction of the national demonstration park for comprehensive prevention and treatment of chronic diseases.

(4) The public health emergency management system was further strengthened. In the daily cleaning work, implement the strategic policy of multi-dimensional preventive measures, persevere in the prevention, prevention integration, scientific and standard prevention, and win the long-term battle of COVID-19 prevention and control. We will again implement basically new public health management projects and

important new public health management projects. Integrate emergency resources, establish Feixi County Emergency Center, improve the level of pre hospital emergency care, and ensure the health of residents.

(5) We will implement an extensive two child policy to promote balanced population growth. We will fully implement the current two child policy, innovate, develop and improve family planning policy management methods and service projects, issue the current policy on supporting facilities, and promote the matching and connection between the family planning policy and the current standard social development national economic policy. Gradually improve the terminal software of home development trend, adjust and improve the preferential policies for awards, special assistance, and elderly services. The comprehensive service capacity was further improved.

(6) We will fully implement all policies for healthy poverty alleviation. Take the "two worries and three guarantees" as the starting point, implement various detailed health policies, strengthen the bottom covering function, and relieve the pressure of poor people to see a doctor. Orderly promote family physician service projects and complete the full coverage of contracted services. The paid signing rate is leading in the city. Carry out county level paired assistance to help the medical technology level of Gongqiao Township, Funan County.

(7) We will strengthen the leadership of Party building and the construction of medical ethics and conduct. Compacting responsibilities and promoting fine management, specialization and systematization of party building, We should develop in the right direction, earnestly fulfill the political responsibility of governing the Party, and constantly improve the Party's theoretical work.

#### **3.2. Prediction of development trend**

(1) Policy support was strengthened and the industry gradually rose. Conscientiously implement the Opinions on Strengthening the Construction of Public Health System and the implementation plan of the provincial discipline inspection commission and provincial party committee. We will increase funding for public health services, and implement a system of "providing services by the first level financial bureau, and evaluating services by the second level performance". Implement the mechanism of "public welfare first class financial supply, public welfare second class performance management". Efforts should be made to deepen the patriotic health campaign and promote the integration of health into all policies. In recent years, in response to the aging problem, the Chinese government has continuously introduced policies to support and standardize the development of the elderly care industry.

(2) Strict and standardized industrial supervision has become a general trend. The public health emergency management system was further strengthened. The strategic policy of persevering in prevention and control, prevention integration, scientific and standard prevention and control will win the long-term battle for the prevention and control of COVID-19. Implement the strategic policy of multi-dimensional preventive measures in daily cleaning work, and implement new basic public health management projects and important public health management projects again. Encourage to participate in the grassroots creation of high-quality services. Strengthen the training of rural order oriented free medical students. We will provide health

services for key populations. We will promote balanced population growth. We will fully implement the current two child policy, innovate, develop and improve family planning policy management methods and service projects, issue the current policy on supporting facilities, and promote the matching and connection between the family planning policy and the current standard social development national economic policy. Gradually improve the home development trend terminal software, and increase the supply of public welfare support. We will strengthen the basic construction of the women's health care security system, and create a second-class, first-class maternal and child health hospital. We will do a good job in piloting the development of a social and psychological service system to ease the pressure on poor people to seek medical advice. Orderly promote family physician service projects and complete the full coverage of contracted services.

(3) "Internet plus" new model. According to the 'mobile medical physical and mental health' service project, the basic construction of electronic health code, the basic public health management 'two card system', 'smart medical assistants' and other information management applications, the township health management service continues to be an intelligent system' So far, 636800 rural secondary diagnosis and treatment patients have been assisted in diagnosis at the Smart Medical Assistant demonstration site, bringing 160000 rural secondary diagnosis and treatment patients intelligent medical treatment, and improving the diagnosis and treatment service capacity of rural secondary medical personnel.

(4) The whole industrial chain is gradually improved in the upstream, middle and downstream. Serve the construction of national and provincial medical institutions in the county, and strive to introduce other high-end medical and health resources. We will encourage and guide social capital to provide large-scale and personalized medical services, and make up for the weaknesses in pediatric outpatient services, rehabilitation services, elderly care services and other health services. Conscientiously implement the Opinions on Strengthening the Construction of the Public Health System and the implementation plan of the provincial discipline inspection commission and provincial party committee. We will increase funding for public health services, and implement a system of "providing services by the first level financial bureau, and evaluating services by the second level performance". Strengthen the management of diagnosis and treatment behavior, rational drug use and medical consumables.

### **3.3. Analysis of advantages and disadvantages of development**

#### **3.3.1. Development advantages**

Feixi County is located in the middle of Anhui Province, close to the provincial capital Hefei. It has jurisdiction over 14 towns and 266 villagers' committees in the township, and the county party committee and government are only 7 kilometers away from Hefei's government services; The location is superior, with four railway lines and two expressways across the township. In 2010, Feixi County was elected one of the top 100 counties in China. The annual average income of urban practitioners is more than 33000 yuan, and the annual per capita net income of farmers is 7097 yuan, ranking first in all counties and cities in Anhui.

(1) National and Anhui medical reform environment. Anhui's comprehensive reform and innovation of grassroots

medical and health care has carried out scientific exploration at the level of strengthening grassroots medical and health care and establishing mechanisms. Under the great theme of the national and Anhui medical reform, Feixi County adjusted itself to the situation and explored a reasonable way to adapt to the development trend of the local medical and health management system. In the whole process of reform and innovation, we have experienced many deployments and adjustments. On the one hand, according to the dynamic adjustment and implementation of national and provincial medical reform policies; On the other hand, it is also the answer and handling of practical problems. From the perspective of the overall progress of reform and innovation, Feixi County has implemented a series of countermeasures closely around the capacity building of grassroots medical and health service projects, and has produced a new operation mechanism of grassroots medical and health services that "maintain and maintain serviceability, stimulate initiative, and ensure sustainability".

(2) Effective financing and supervision system. The reform and innovation has always maintained the public social security system for health and epidemic prevention at the junior high level, which is closely related to the reasonable equity financing and control of government agencies. The government of Feixi County implements zero margin subsidies for basic medical services, facilities and drugs. Every stage from cost approval, expense budget to fund management involves the harmony of the rights and interests of various institutions. At the same time, the control of health and epidemic prevention expenditure at the junior high level is an important part of standard environmental health resource allocation.

(3) Social medical security system. Feixi County has established an integrated management system of county and village finance bureaus, rigorously implemented asset expenditure management and control, and basically controlled medical behaviors according to the information system. The medical insurance system for urban residents in Feixi County is the main guarantee factor for the implementation of reform and innovation. The current policy of reimbursement of medical expenses at the grassroots level is better than that of county-level hospitals, and the current policy of reimbursement of medical insurance in the province and within the province is better than that of cross region and cross county. The reform and innovation of the supplier's payment method and the bold exploration of the hospital's total outpatient payment and inpatient treatment service project payment method by disease can not only standard the diagnosis and treatment personal behavior of grass-roots medical and health workers, but also reflect the different role of various health services in the system management, and create the corresponding staff incentive system.

(4) Performance appraisal system. The performance appraisal standard is the driving force system to promote reform and innovation. The performance evaluation and internal structure position evaluation, which focus on the total number, quality, actual effect and citizen satisfaction rate of service projects, not only stimulate the initiative of grassroots medical and health workers, but also standardize the individual behavior of grassroots medical and health workers at a certain level. At the same time, in addition to linking the evaluation conclusion with the total amount of performance pay and the income of medical staff, it also links with the government subsidies and medical insurance payments to

complete the efficient connection of management plans, security mechanisms and internal structure management plans.

### 3.3.2. Constraints

(1) The benefit distribution mechanism is not sound. In the network construction of grassroots medical and health system software, vertical integration has not established a sound principle of rights and interests distribution. At present, the one-to-one assistance and counterpart assistance of the process with incentive system, which is the core of the county town medical association, is not a reliable hierarchical diagnosis and treatment system. The prerequisite for the emergence of a health service community at the county, township and village levels is to create a clear rights and interests linkage mechanism, which must be more practical management system and deployment.

(2) The staffing system needs to be improved. The personnel management system is an important part of reform and innovation. The current standard formulation rules and regulations are still "real identity management method" rather than "position management method", which is unfavorable to the implementation of other policies and measures such as the reform and innovation of the salary distribution mechanism, and greatly reduces the incentive system of performance appraisal standards.

(3) The design of essential drug system is defective. After the implementation of the basic drug system, although the category of the basic drug directory has been expanded and the structure has been improved, there is no reasonable connection between the basic drug directory and the NCMS reimbursement file directory. The type of drugs does not conform to the specific needs of clinical medicine, and the individual behavior of taking drugs in primary medical care is restricted, which reduces the number of primary medical services and harms the ability of primary medical care.

(4) The concept of seeing a doctor needs to be changed. The final goal of strengthening the capacity of environmental health services at the grassroots level is to complete the role of health and epidemic prevention at the grassroots level and provide high-quality, safe, convenient and fast health services for the people. Some patients have the psychological state of "striving for a high diploma" and "feeling of famous Chinese medicine", and grassroots medical treatment suffers from "public opinion pressure" of different levels. Patients' habitual diagnosis and treatment and insufficient knowledge of primary and intermediate health care are obstacles to reform and innovation.

## 4. Analysis of Practical Survey Data

### 4.1. Investigation purpose

For a long time, the rural medical and health services in China have not been fully developed, and the supply always fails to keep up with the demand. The equipment is not perfect, the public health service and health service staff are lacking, the intelligent and information management diagnosis and treatment methods are outdated, and the medical drugs are not enough. Deficiencies in rural medical and health service projects. In the report of the 19th National Congress of the Communist Party of China, Chairman Xi clearly proposed the strategy of rural revitalization and development. In this strategy, we have made it a priority to deal with the problems of agriculture and animal husbandry, rural areas and farmers. Of course, rural medical care is one of the major problems.

Therefore, under the strategy of rural revitalization, what is the development path of rural medical and health services, and how to shape the sense of happiness, satisfaction, and belonging of farmers to ensure the healthy and happy life of farmers are the main purposes of our research and investigation. The team adopts online survey to obtain data from various aspects for analysis.

### 4.2. Data source

Interview with important insiders, archives related to the medical reform in Feixi County, and questionnaire survey on basic medical conditions in the county.

### 4.3. Analysis of Survey Data

#### 4.3.1. Macro data analysis

The report of the 19th National Congress of the Communist Party of China put forward the strategic plan for rural revitalization and development. Horizontally, rural revitalization is an all-round transformation and development, including not only the transformation and development of social development, economic development, and natural environment, but also the transformation and development of medical and health services, public cultural services, and ecological environment protection. However, this unexpected COVID-19 epidemic has exposed the problem of imperfect medical and health management system in China, especially in rural areas. So what are the problems of medical and health services in rural areas?

The first is insufficient capital investment and unbalanced distribution and utilization of health resources. In recent years, the government's investment in medical and health care has increased significantly than before, but compared with the rapid development of overall funds and the increase in health care needs of rural people, it is still lacking. In particular, the investment in rural public health projects is insufficient. According to statistics, 80% of medical resources in all parts of the country are concentrated in metropolises, and 30% of them are concentrated in tertiary hospitals. Every year, about 80% of the people who go to Grade III A hospitals are common diseases and multiple diseases that can be handled by outpatient clinics of basic level hospitals. This is also one of the primary factors of the "difficulty in getting medical treatment" reflected by rural people.

Secondly, because the current policy of regional allocation and construction is not enough, the compensation system is not perfect, the management method is loose, the overall role of public health at the grassroots level is not high, and the daily tasks undertaken by health resources, management mechanisms and other levels are not clear, so there is still a tendency to focus on treatment and neglect prevention.

In addition, rural medical care overemphasizes hardware over software and lacks human resources. Rural primary health care lacks the conditions and systems for introducing and retaining talents. In addition, problems such as low wages and subsidies for rural doctors, insufficient business process capability, resignation and frequent changes often occur. According to statistics, most of the medical teams in cities and towns are classified personnel or non health professional technicians from diagnosis and treatment units. There are almost no staff with college diplomas, and the diplomas are mainly from technical secondary schools. Nearly half of the staff without diplomas have low competence and frequent changes, which seriously affect the work quality of grassroots disease prevention and treatment service projects.

Therefore, there should be corresponding policies for these problems. First of all, we should improve the infrastructure of equipment, make full use of medical resources, make full use of the macroeconomic policies of government departments, and encourage urban diagnosis and treatment projects to invest in rural areas. Reduce the uneven distribution of medical and health resources between urban and rural areas. Secondly, we should increase the actual investment and improve the rural medical security system. Medical services belong to public services and can only rely on government investment. Therefore, the government should make appropriate policies to improve the allocation of rural medical and health funds. Reduce the problem of uneven investment in urban and rural areas. We should also improve the level of service and supervision. First of all, strengthen the supervision and application of rural medical care, define the responsibilities of rural medical service projects according to effective management plans, allow the composition of urban health personnel, and implement the management plan of performance evaluation. Second, establish rules and regulations for the certification and verification of rural doctors' professional qualifications to ensure that rural doctors receive stable wages and overall service levels. At the same time, we should formulate and improve tax incentives, exempt and reduce relevant taxes, and ease the pressure on rural medical institutions.

According to the different types of elderly care places and elderly care services, there are mainly three types of elderly care models in China: home based elderly care, community based elderly care and institutional elderly care. For these three pension models, home is the foundation, community is the support, and institutions are the support. Up to now, both home-based elderly care and community-based elderly care have relied on the familiar living environment of the elderly, and community elderly care service institutions have also carried out door-to-door services for the elderly at home, so the two elderly care models are gradually showing a trend of integration. In the 13th Five Year National Plan for the Development of the Aged Care and the Construction of the Elderly Care System issued by the State Council in 2017, "home-based community elderly care services" has been proposed as a whole, becoming an important direction for the development of the elderly care in 2017-2020.

Since 2000, China has entered the age of aging, and the aging process has gradually accelerated. The potential of the elderly care industry around the needs of the elderly has been released. According to the calculation of the research group of the National Social Science Fund "Research on Pension Consumption and Pension Industry Development", the scale of China's elderly care market and pension industry will increase from 1.87 trillion yuan and 490 billion yuan in 2015 to 48.52 trillion yuan and 21.95 trillion yuan, with annual growth rates of 9.74% and 11.48% respectively.

After the founding of New China, there were three birth peaks in history. The first "baby boom" appeared around 1962. At this stage, the birth population has concentrated into the aging stage, and has a certain economic foundation and consumption capacity through reform and opening up. At the same time, the population aged 15-64 has gradually declined since about 2015, the pressure on young people to provide for the elderly has increased dramatically, and the traditional family pension foundation has become increasingly weak.

The domestic elderly care service industry started in the period of reform and opening up. Before that (mainly from

1949 to 1979), the elderly population mainly relied on family support, and only a small number of elderly people could get the uniformly distributed elderly care service resources of the state. After the reform and opening up, especially since the beginning of the 21st century, the proportion of the elderly population has been increasing, the traditional family pension foundation has been weakened, and the government led pension institutions have insufficient resources. Therefore, encouraging social forces to participate in the pension business has become an inevitable choice for the government system design.

Since China entered the aging society in 2000, state-owned enterprises and large capital enterprise groups have rushed to enter the elderly care industry and set up elderly care institutions to promote the rapid development of the industry. Small and medium-sized enterprises are also looking for opportunities. However, up to now, the domestic elderly care service industry is still at an early stage of development, and the industry as a whole is "scattered, chaotic, weak and poor".

The elderly care industry focuses on the needs of the elderly, involving production and manufacturing, talent training and other links. At present, the home-based elderly care in China is still at the stage of "home-based elderly care", and the software and hardware services required for home-based elderly care have not been developed and improved. As far as the elderly in China are concerned, especially the elderly who live alone are lack of calling and reporting facilities. There is little difference between the elderly housing and ordinary housing. For the elderly, especially the elderly who live alone, the lack of calling and alarm facilities has become the main problem of the elderly housing. In addition, the popularity rate of various aging facilities required for the elderly housing is still low.

At present, the development of all day care and day care elderly care institutions established by real estate enterprises in China is relatively mature, and their main target customer group is high-end + active elderly. On the contrary, the rigid population represented by the elderly disabled people is not really valued. At the same time, elderly care institutions mainly focus on hardware investment, and their service quality and skills training are relatively weak. At the same time, many elderly care apartments do not have a clear customer orientation, and their prices are not reasonably priced according to the elderly at different economic levels, resulting in a certain gap between the supply and demand of the overall market, which directly leads to difficulties in the operation of some welfare and profit oriented elderly apartments.

#### 4.3.2. Micro data analysis

Feixi County, located in the middle of Anhui Province, was selected as one of the top 100 counties in China in 2010, and its per capita annual income is at the leading level of Anhui Province. At the same time, the medical level of Feixi County is also relatively high. First of all, zero margin marketing of drugs was carried out in the province, and the reform was promoted by this way. The quality of medical services has been improved, and the satisfaction of the masses has also been improved. However, there are still some problems, such as the lack of grassroots talents and the instability of the team. The rural medical and health conditions are difficult and the environment is poor, resulting in many college students and grass-roots medical personnel are unwilling to work here. Secondly, the burden of medical care for the masses is still very heavy. The shortage of technical personnel at the

grassroots level and the poor equipment have led to more people going out to see doctors, especially for some common diseases. Frequently occurring diseases also go to provincial or municipal hospitals, increasing the burden of medical care.

Therefore, Feixi County has made great efforts to strengthen the construction of medical and health capacity in recent years. First, it has accelerated the expansion of high-quality medical resources and improved its quality. Serve the construction of national and provincial medical institutions in the county, and strive to introduce other high-end medical and health resources. We will strengthen support for medical and health development. While promoting the existing construction projects, we launched the relocation and new construction projects of Sanhe and Shishu Health Centers. Plan the construction of county public health center and integrate public health service modules such as disease control, health supervision and first aid. We will intensify the recruitment of medical college graduates, and plan to recruit 1000 graduates within three years. Support public hospitals to introduce high-level and urgently needed professional talents, and establish a mechanism to introduce medical and health talents. We will strengthen the training of grassroots medical personnel and strengthen the training of general practitioners. We will encourage and guide social capital to provide large-scale and personalized medical services, and complement the weaknesses of medical services such as pediatric, rehabilitation, and elderly care. We will strengthen medical quality control and medical technology management, as well as management of diagnosis and treatment behavior, rational drug use, and medical consumables. Make up for the shortage of technicians and uneven allocation of resources. In addition, the infrastructure projects of primary and secondary health care, such as the standardization of space layout, the upgrading of facilities, and the updating of health information management system, have also been improved. The outpatient volume of township hospitals and the number of machinery and equipment above 10000 yuan have also increased.

Therefore, the medical reform in Feixi County has made great achievements. Anhui has made bold exploration in the comprehensive reform and innovation of grass-roots health. Feixi County, under the background of the country and Anhui Province, explored an important way to adapt to the development trend of the local medical and health system. From the overall progress of reform and innovation, Feixi County has adopted a series of countermeasures closely around the capacity building of grass-roots health service projects, and implemented the new mechanism of grass-roots medical and health operation. At the same time, it is also the embodiment of the rural revitalization strategy, strengthening the grass-roots level and implementing precise policies. Feixi County guides rural people with difficulties in diagnosis and treatment at different levels, guides common diseases and common diseases to see a doctor in designated medical institutions at the grass-roots level, and reduces the burden of medical expenses. We will precisely implement the basic medical insurance policy, subsidize and participate in insurance by category for specific people in need, and actively mobilize people who have been deprived of poverty to participate in insurance. At the same time, we should give play to the role of family contracted doctors, prevent the occurrence of chronic diseases and special diseases, and improve the health literacy of rural people.

Hefei's home-based elderly care service objects can be

divided into three age groups, namely, "70-79 years old", "80-89 years old" and "90 years old and above". The statistical results show that the elderly of all ages have the largest proportion of demand for meal delivery services, followed by domestic service. For meal delivery service, almost all the elderly under 90 years old need it, while only 63.6% of the elderly over 90 years old need it; For domestic service, the demand proportion of the elderly aged 90 and above is large, and the demand proportion of other age groups is not different; For maintenance services, the proportion of the elderly aged 70 to 79 is relatively larger, and the elderly aged 90 and above need maintenance services.

In each district, the largest demand for home-based elderly care services is meal delivery, followed by housekeeping services. From the perspective of each district, the elderly in Economic Development Zone, Shushan District, Baohe District and Luyang District have more demand for meal delivery services; Yaohai District and Luyang District have more demands for housekeeping services; The Economic Development Zone and Yaohai District provide more maintenance services; Compared with other districts, the Economic Development Zone has more demands for rehabilitation health care and spiritual comfort services.

## **5. Development Path of Rural Medical and Health Services under the Strategy of Rural Revitalization**

### **5.1. Basic principles**

We will always adhere to the guiding principle of the Party in rural areas and reform, unswervingly adhere to and increase the Party's leadership in rural medical and health work, improve the leadership system and mechanism of the Party in rural medical and health work, and ensure that the Party always has the power to coordinate all parties in its work. We will again promote the reform and innovation of agricultural and rural health care, create a good premise and natural environment, provide a foundation for the long-term and orderly development of rural areas, and make every effort to improve the efficiency of rural resource allocation, so as to mobilize social forces to participate in rural revitalization of rural health development.

We should always give priority to agriculture, rural areas and farmers, and take farmers as the main body. Take the development of rural medical services as the relative center of rural development, give priority to the collection of diagnosis and treatment assets, achieve factor allocation at all times, effectively ensure the allocation of funds, allocate public cultural services, and accelerate the filling of problems and weaknesses in agriculture, animal husbandry, rural medical and health. At the level of ensuring farmers' medical and health care in an all-round way, we further gave full play to farmers' leading role in rural revitalization, and stimulated farmers' independent innovation, initiative and subjective initiative. Accelerate the implementation of the strategy of rural revitalization and development.

Persist in comprehensive development, from simple to deep. Grasp the scientific meaning of rural revitalization accurately and efficiently, pay attention to the coordination and orderliness of rural medical service development, in order to better fully tap the basic functions and use values of various reasonable rural economic development, fully release the development prospects of agricultural rural farmers, and provide standards for all-round transformation and

development. Grasp the harm of scientific health services to the diversity, difference and regional characteristics of villages. When implementing the rural revitalization strategy for rural medical and health care, we should first implement the plan, then highlight the key points, and finally adopt classified policies. Finally, we should reasonably set stage goals and tasks according to typical guidance, and firmly promote the implementation of the rural revitalization strategy on the premise that the development of farmers' medical and health care is guaranteed.

## 5.2. Strategic positioning

Build a typical rural medical and health area across the board. Adhere to rational regulation and control of urban and rural resources, further improve the rural medical foundation, closely follow the main line of urban-rural integration development, increase efforts to update and optimize the rural medical and health environment, and make excellent traditional ways to comprehensively improve the rural living environment and people's quality of life. Establish a model area for rural revitalization in the central urban area based on medical and health care. Based on the highest specificity of big cities, follow the laws of social and economic development, and persevere in the concept of urban planning and construction in rural areas, to lay the foundation for promoting agricultural science and technology and high-end development trends, promote the close integration of rural diagnosis and treatment development trends, promote the integration and interaction of key towns, tourist towns, and the most beautiful villages within the scope of big cities, so as to explore the goal of rural revitalization approaches that conform to the characteristics of "big city areas". In line with the continuous accelerated urbanization process and the new development trend of green consumption, with the modern urban transaction as the guide, high-quality agricultural products, efficient farming and animal husbandry, and farmers' high income as the overall goal, and with the characteristic of agricultural integration, multi-purpose expansion of farming and animal husbandry, and the innovative development trend of farming and animal husbandry formats as the characteristics, it focuses on the technical content and content of farming and animal husbandry to create a modern urban modern agricultural demonstration park.

## 5.3. Development objectives

By 2024, important progress will be made in rural health care. The system and mechanism of urban development trend integration were basically established, and the basic medical security system was basically completed. According to the rural industrial development planning, the capacity and quality of work have been significantly improved, the construction of ecological and livable villages has been carried out in depth, and the level of rural civilized behavior,

rural governance and grass-roots party building has been further improved, maintaining the overall sense of harmony and stability of rural society.

By 2026, the level of rural medical and health care will have made phased progress. The system and mechanism for the development trend of urban-rural integration are basically sound, and the level of public services in rural areas is basically improved. The modern agricultural management system has been basically set up, the development trend of "new six industries" of agriculture and animal husbandry has been generated in an all-round way, the farmers' wage level has been further improved, and the effect of targeted poverty alleviation has been promoted in an all-round way; The rural living environment has been greatly improved, and the construction of ecological and livable villages has been vigorously carried out; The outstanding tradition has been inherited and developed, and the farmers' spiritual life and basic medical insurance requirements have been reasonably met; The contemporary rural governance management system was basically established, and the rural governance capacity was further enhanced; The system and mechanism of leading cadres in the Party's rural work have been further improved, and a number of distinctive rural revitalization methods and work experience have been explored.

## Acknowledgment

This work is supported by 2021 Anhui University of Finance and Economics Provincial Undergraduate Innovation and Entrepreneurship Training Program, "Research on the Development Path of Rural Medical and Health Services under the Strategy of Rural Revitalization——Take Feixi County, Anhui Province as an example "(No. S202110378073).

## References

- [1] Wang Hui, Zhang Jirong. Changes of rural old-age security system and optimization path of old-age service system -- based on the central "No. 1 Document" [J]. Administrative Forum 2022,29(03):139-146.
- [2] Hu Xin. Research on the Construction of the Rural Revitalization Strategy Talent Support System [D]. Jilin University, 2021.
- [3] Li Zhibing. Research on Tourism Development of Qiang Villages in the Upper Reaches of Minjiang River under the Process of Rural Revitalization Strategy [D]. Southwest University for Nationalities, 2021.
- [4] Wang Jun, Wang Xueyao. Research on China's Integrated Medical and Health Service System: Policy Evolution and Theoretical Mechanism [J]. Journal of Public Administration 2021,18(03): 152-167+176.
- [5] Zhao Li. The new medical reform and the development of China's rural medical and health services -- ten years of experience, practical difficulties and good governance promotion [J]. China's rural economy 2019,(09): 48-69.