

Smart Solutions For Healthcare System
Cases From China

Jiaying LIN

Tongji University, Shanghai, China
jiaying_lin@yeah.net

Abstract

In the digital age, the structure of global economy has been transformed; the health system has also changed. By reviewing the history and statistical data of China healthcare system, and evaluating them in a global realm, this paper reveals the fact that medical system in China still falls behind the world average level, which doesn't coordinate with the process of urbanization development. The main reasons are deficiency of financial expenditure on medical institutions and health care workers, which is hard to be improved within a short time. In recent years, local governments have adopted Smart Healthcare System to meet the people's demand for better health care. Cases include Smart healthcare card, new health insurance policy and telemedicine were introduced. Following by the review of these smart methods, and presents a holistic medical service system-planning from predictive urban planning to responsive urban governance, the whole process of healthcare system could be realized by big data analysis and local legislation establishment, making planning decisions more rational and feasible.

Keywords smart cities, healthcare, China

1. Introduction

Since China implemented reform and opening policy in the late 1970s, China has achieved the general adoption of the market principle. Financial reform has also been made, moving the healthcare system toward a free market system. National healthcare for all the people was one of the goals. Some of health facilities were encouraged to support their operations rely on user payment. However, local governments continued to take control of the prices and hospitals. These financial and organizational policies were not coordinated. These uncoordinated policies caused many problems in the system. Market-based financing created more unequal access to healthcare between the rich and poor. Irrational classification system of public healthcare and fragmented management caused inefficiency, waste and poor quality of health care.

In the 21st century, despite the fact that China has higher income, better medical equipment, advanced medical equipment, due to negative effects raised by urbanization, industrialization and globalization, Chinese public health system has encountered greater difficulties. More and more people are more and more unsatisfied with the low efficiency and the high expenses.

healthcare service. Then another reform in healthcare system was raised in 2009, the government decided to recover the national healthcare insurance for all the people.

To examine China's Health care condition from a holistic perspective, data from 15 developed countries were collected to compare with China. Four major indicators were chosen, including health care expenditure per capita, health expenditure proportion of GDP, physicians per 1,000 people and hospital beds per 1,000 people.

1.1 Healthcare expenditure

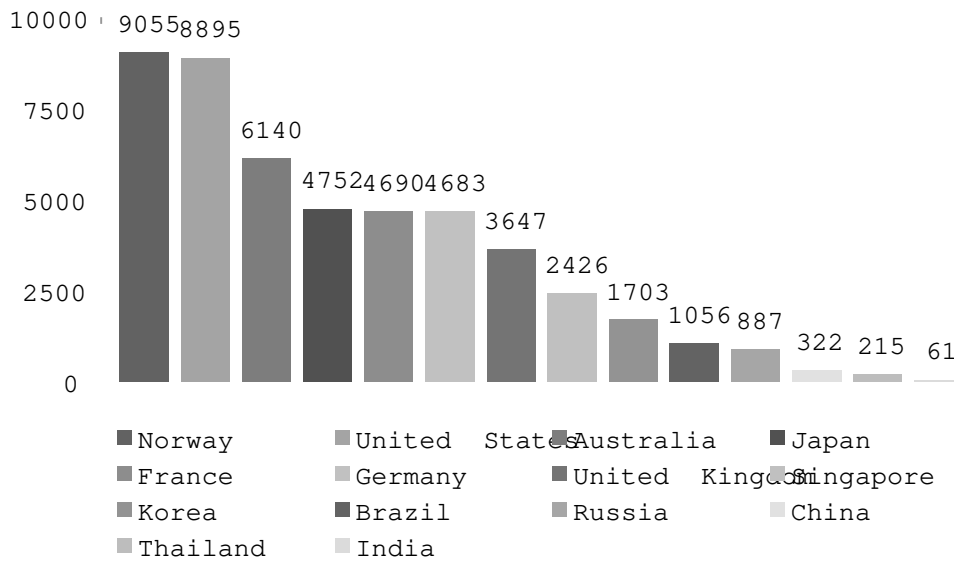


Figure 1. Health Expenditure Per Capita in 2012 (current US\$)
(Resource: World Bank Open Data)

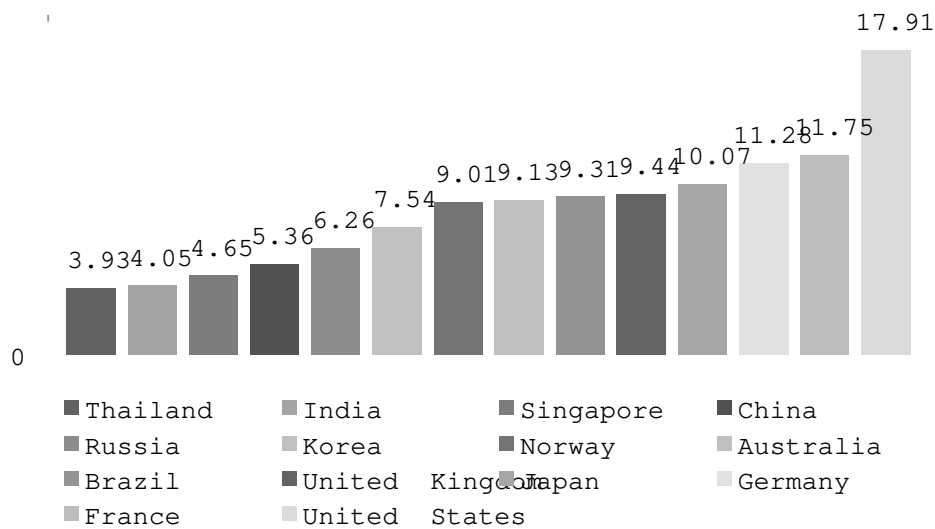


Figure 2. Health expenditure % of GDP in 2012 (current US\$)
(Resource: Chinese Health and Family Planning Statistical Yearbook)

China ranked 118 in health expenditure per capita in 247 countries and regions. Although China is better than Asian countries like India and Thailand, but it still lags behind developed countries quite a lot, for example the index of Norway is almost 30 times that of China.

Besides, despite the fact that China has experienced rapid growth in economy, its health expenditure as a portion of GDP is still low. The reason may be Chinese macro-health policy and health care financing and delivery toward a free market system in the 1980s.

1.2 Healthcare facilities

When it comes to the index of physicians and hospital beds per 1000 people, almost all of China are not advanced in the world, the latter could be compared with that of the former is one of the last in the main countries.

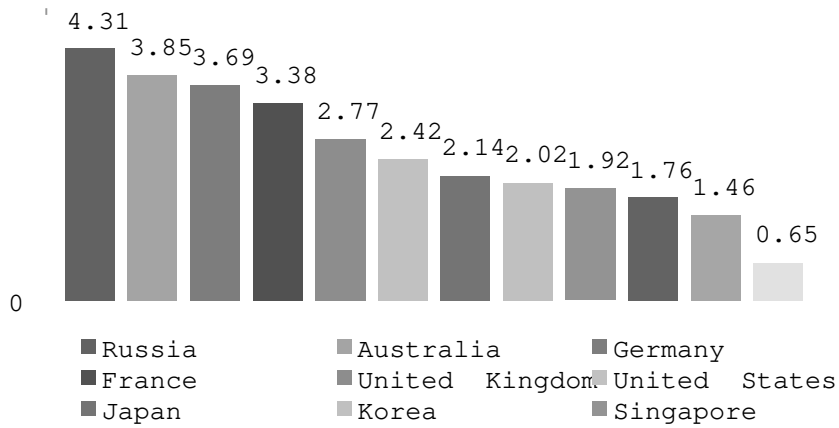


Figure 3. Physicians per 1,000 people in 2012
(Resource: World Bank Open Data)

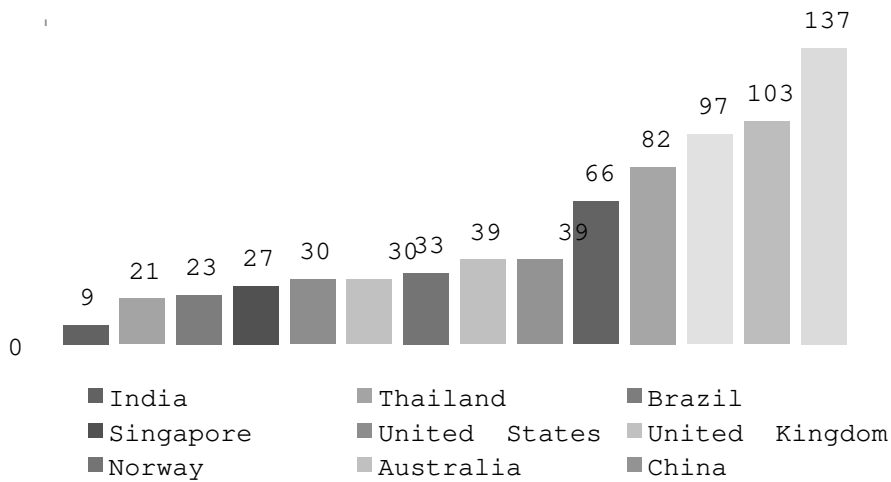


Figure 4. Hospital beds per 1,000 people in 2012
(Resource: World Bank Open Data)

Comparing the conditions of economic development and healthcare development, obvious that healthcare service still fall behind the economic and urbanization

To conclude, the hardware condition is generally better than the software condition seen from the rank of the number of health care institutions, hospital beds and reflects the fact that China paid more attention on hardware construction, but of workforce in health care.

The reason could be as follows: firstly, China is still a developing country, government were still going to infrastructure construction projects, but not y medical workers. Secondly, since China changed the financing policy in health was invested in the income of medical workers, therefore people working in th adequate to provide qualified service. Thirdly, the whole system is free marke could go to hospitals whenever and wherever they want, therefore, there s alv workers in the general hospitals, but not much patients were treated in commu institutes.

2 Smart Healthcare

For several decades, China is experiencing rapid urbanization from 26% in 1990 end of 2014, but still less than other mid-level developing countries such as M urban) or developed nations like the United States (80 percent). Chinese governm further urbanization to support economic development. But pollution, housing a traffic congestion are already heavy burdens, so it s urgent for cities to f creating a better life for migrants.

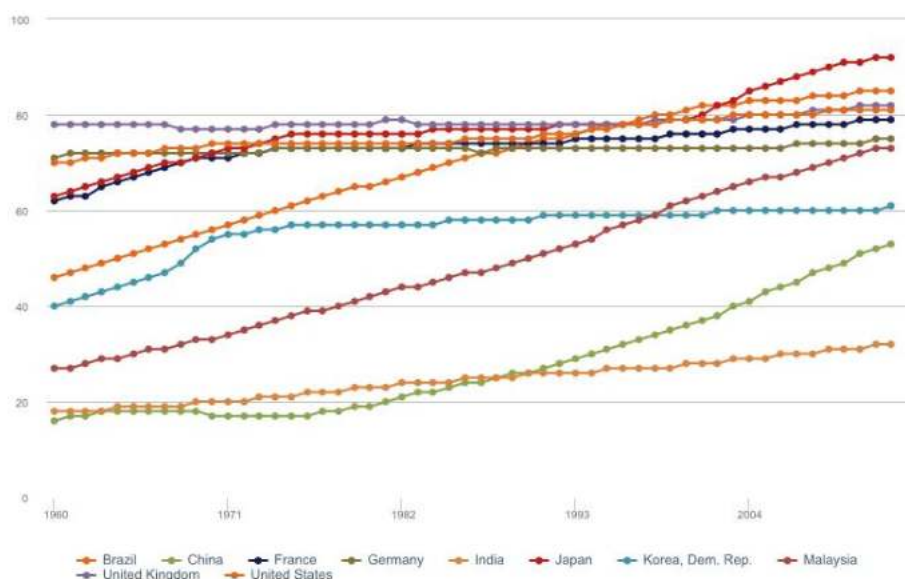


Figure 5. Urban population rate in the world (Resource: World Bank, World Development Indicators)

Then the concept of Smart City was raised. A smart city (also smarter cities) uses various technologies to enhance performance and well being, to reduce costs and resources, and to engage more effectively and actively with its citizens. Key 'smart' sectors include energy, health care, water and waste. A smart city should be able to respond to global challenges than one with a simple 'transactional' relationship with its citizens.

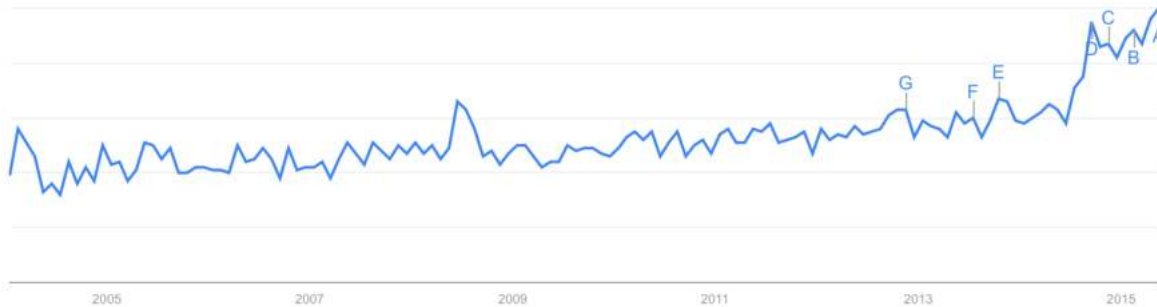


Figure 6. Search trend of Smart City
(Source: Google Trend)

Since the central government made development of smart city technology and policy a national policy, it quickly gained popularity in China. Almost every city is designated as a pilot project of Smart City, which is led by the Ministry of Housing and Urban-Rural Development (MOHURD). Till now, MOHURD selected 290 local governments and economic development zones as official smart city pilot project sites, making them eligible for a ¥800 billion (\$130 billion) investment fund sponsored by the official China Development Bank.



Figure 7. Cities with smart city projects at the end of 2013, according to CCID
(Source: Donald Johnson/CCID Consulting)

Health would have significant effect on the mobility of capital and labor. However, the role of public healthcare has not been recognized in the field of urban planning. In developing countries, economic growth, public healthcare situation are still far from satisfactory. The increasing workload of doctors and insufficient financial expenditure on public healthcare compared to developed countries.

Smart Healthcare, as a new management approach has been introduced to improve the current situation in public health in many cities in China, especially in the Yangtze River Delta. Telemedicine service system and remote consultation were applied. Besides the successful cases, the experience suggests that urban planners could predict the healthcare demand before making decisions through big data analysis, therefore making more reasonable decisions.

3 Cases from China

The area of China is so large and diversified that it is hard to solve the problem in one time. Therefore, local governments had made efforts to introduce some new methods to change the situation little by little, especially those in the developing areas.

Three cases were selected here to present how local governments in China deal with the problem considering citizens demands in the public healthcare.

3.1 Smart Health Card

Hangzhou, one of the first cities in China to introduce the concept of Smart Healthcare, launched the Smart healthcare project in September 2012, and quickly spread it to all the county hospital, 10 provincial hospitals, 45 community healthcare centers and 1000 healthcare stations in Hangzhou.

The convenient payment function of the citizen card is the core technique of the Smart Healthcare. Without requiring patients to go to the counter for services, it enables citizens to pay for services, consulting rooms and nurse stations; to charge, make reservations, query, pay medical fees, and get test reports on the self-service machine, which is more convenient and time-saving.

According to statistical data, there have been 2.5 million citizens opened the payment function of the citizen card, which benefited more than 6.55 million outpatient and inpatient visits. The average time saved per person is about 1 hour.

Online tests and reports inquiry systems were also promoted by the Smart Healthcare. The system has served about 0.95 million person-times, at least 10% patients were excused from going to hospital for tests and reports personally. The estimated time saved is about 2 million hours, which means 0.2 million hours were saved for the whole society, and it is also a great achievement under the current conditions.

3.2 New health insurance policy

The healthcare system in China used to develop upon the administrative framework. Healthcare facilities were classified into three grades according to ownership and administrative departments.

Chinese government was determined to promote the classified healthcare system by a two-level service system of city hospitals (general hospitals, specialty hospitals) were adopted to realize the reasonable distribution of healthcare facilities.

With the ownership of hospitals transferred from administrative departments to government, provincial hospitals, city hospitals and district hospitals were expected to grow in the city- community two-level healthcare service system.

Many cities shared the thought that emphasis should be put on general hospitals, while the hospitals in the middle would have to be modified for new system.

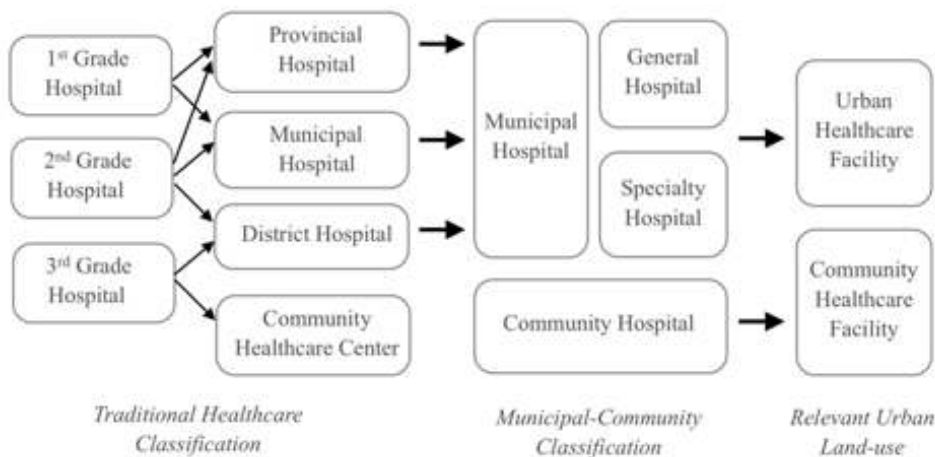


Figure 8. The transform of Healthcare classification System (W.P. Lin, 2010)

The new City-Community system were established, however, it didn't function well. Owing to the huge difference between developed general hospitals and star hospitals in medical devices and service quality, but the same expenses they preferred to go to general hospitals all the time, regardless of which kind of result, the pressure of general hospitals was not released and the community hospitals didn't have enough patients to get the chance to develop.

Therefore, Guangzhou announced a new health insurance policy that has become effective in 2015. The new policy is mainly about raising the proportion of health expenditure insurance in community hospitals. To transfer from community hospital to general hospital to cover a higher proportion than go to general hospitals directly. Citizens are advised to go to a regular community hospital first in order to get transaction service. Otherwise,

regular general hospital and would not get the most of health insurance. On the other hand, more than 20,000 people went to community hospitals to choose their regular hospital, which is more than the peak number in 2014.

This means currently the new policy has an effect on attracting people to community hospitals, but the number of patients in general hospitals has not decreased obviously as expected.

3.3 Ningbo Cloud Hospital

After six months of trial operation, the first cloud hospital in China, Ningbo Cloud Hospital, officially opened in March, 2015. This platform based on new information technology, including cloud computing, big data, internet and internet of things is trying to deal with the current healthcare system, while using internet methods to enhance current medical resources and create a borderless hospital union. (China Business News, 2015)

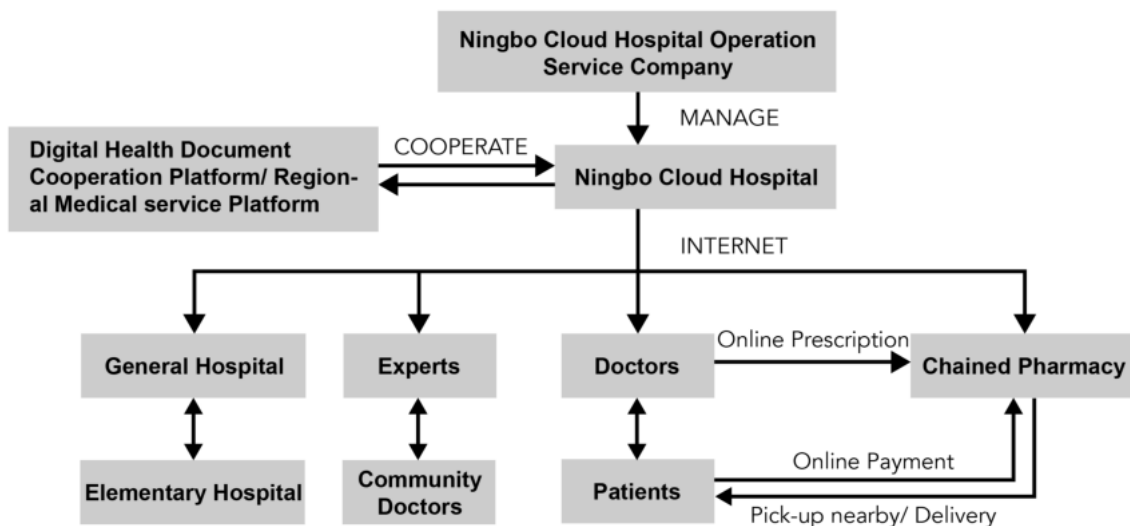


Figure 9. Illustration of the Ningbo Cloud Hospital structure

Till now, there are 100 elementary medical institutions connected to the cloud hospital. General doctors and family doctors are under contract of it. Four cloud consulting rooms for hypertension, diabetes, psychological consultation and general practitioner are available. The cloud hospital is also connected to local chained pharmacies so that the patients can get their prescriptions at any pharmacy nearby. Door-to-door medicine delivery is expected to start in June. Cloud consulting rooms will increase to 10 in July. The cloud hospital is expected to be released in August.

However, the key issue of getting the medical expenses of the cloud hospital included in health insurance is yet to be solved. The condition of current hospital operation is good, but it is believed to change people's life in the future similar to eBay and Tao

4 Conclusions

The cases presented above worked in the different levels of the healthcare. Healthcare technologies such as self-service system, easy payment are improving inside the hospital, saving time and money for patients; The new policy on control in Guangzhou showed a way to cope with irrational medical resources distribution; to some extent toward a future lifestyle. All of them have strengths and limitations.

The Smart Healthcare card is dealing with problems in the small scale not for big and small investments could produce effect immediately, and directly making advantages it brought about, such as saving time and efforts. But on bigger picture the basic issues of the healthcare system, it is more like a compensation but not a solution. After all, people would still rush to general hospitals because of a cold, and the distribution would still be insufficient and unequal.

The new healthcare insurance policy adopted by Guangzhou is more strategic solution for the system. When the resources are not enough, at least the distribution should be fair for patients of different levels of diseases, saving the resources for more urgent cases. It might seem to be more reasonable for the current situation in China. It might seem to be carried out in developed countries for decades, however, it still works and it is still a good idea. Because social justice and affordability are always the core issues citizens care about.

The cloud hospital has a really smart concept, and it makes advantage of the collaboration of all stakeholders. It definitely makes referral and treatment of chronic diseases easier for the patients. But the limitations are face-to-face contact is still important. An online consultant could not replace that. Therefore it could not take the place of specialty hospitals. It is more like the future version of family doctors that are needed.

When we think about Smart Cities, technologies like cloud computing, big data, etc. might be the first things to occur. However, Smart does not necessarily mean technology. The Guangzhou Case indicated. Technologies alone was not enough, they could only be effective if a stable base has been established, which can be achieved by proper policies.

The most important change brought by Smart Cities is not only technology. Since it has been introduced, there would be no top-down or bottom up procedures any more. It is a network instead of a vertical way. Every stakeholder including citizens, government, institutes, hospitals are all on the same level of a huge co-creation platform.

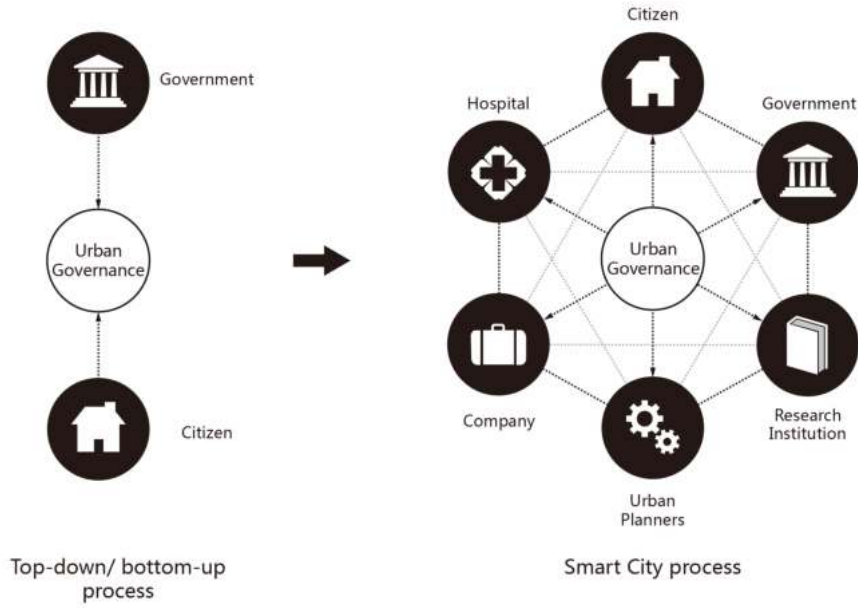


Figure 10. The change of process in Smart City Governance

The improvement of the healthcare system would not be reached by the effort of
It requires the collaboration between healthcare department and urban planning
and government. As we can see from the cloud hospital case, intersection c
important right now but also very difficult to realize. There would still be
through before we finally got to the smart future.

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