

# High-tech health services ease burden

Remote diagnosis and telemedicine among tools used to bring top-notch healthcare to remote areas

By WANG XIAOYU  
wangxiaoyu@chinadaily.com.cn

For years, one of the greatest fears facing elderly residents of Mayi Island in Zhejiang province was the exhausting trip to hospital when they fell sick.

“From waiting for a ferry to get off the island, to riding the bus to the county seat, it used to take the whole day for me to see a doctor,” said Lin Zhongsu, a Mayi resident.

Today, Lin is able to get diagnosed by experienced doctors in larger cities in Zhejiang without even having to leave the island’s small clinic thanks to concerted efforts to bring high-quality medical care to remote and rural areas.

In Lin’s case, 5G-powered augmented reality glasses enabled doctors based thousands of miles away in Zhoushan and Hangzhou to conduct the examination and find out about his symptoms.

The adoption of digital tools is part of the latest efforts by China to promote the sound development of the medical system in its rural areas.

The general offices of the Communist Party of China Central Committee and the State Council recently released a circular detailing their goals of balancing the layout of medical institutions, improving infrastructure, and developing well-rounded teams of health professionals in rural areas by 2025.

Official data shows that there were about 17,000 county-level hospitals, 35,000 township clinics and nearly 600,000 village clinics across China’s vast countryside at the end of 2021.

Qin Jiangmei, a researcher from the China National Health Development Research Center, said that the average life expectancy for rural residents has increased from 74.1 years in 2010 to 76.8 in 2020. Between 2009 and 2021, the rural mortality rates for infants, children under five and the maternal mortality rate — all key indicators of a region’s level of health service — have all dropped by over 50 percentage points.

“More than 85 percent of rural residents are now able to reach the nearest medical service provider within 15 minutes,” she said, adding that basic medical insurance now covers over 95 percent of rural residents.

However, given the country’s rapidly aging population, and the growing burdens of chronic illness and the increasing health demands of the countryside, the gap between urban and rural medical services has become more noticeable in recent years.

Qin said that a lack of medical professionals is badly hampering the advancement of healthcare services in rural areas. “The academic credentials of rural medical workers are relatively low, and there is a shortage of well-trained general practitioners,” she said. “Rural doctors are in short supply, they are aging, and they are not as highly trained.”

Qin said that the lack of medical service in rural areas is being manifested in the decreasing numbers of visits to township or village clinics among total hospital visits nationwide in recent years.

Data shows that visits to rural medical facilities accounted for 44.3 per-



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cent of total visits in 2009, but fell to 29.5 percent in 2021, and the percentage of hospitalizations at rural facilities also fell from 28.7 to 13 percent during the same period.

“While rural migration to cities has played a role in these changes, they also reflect the fact that greater efforts are needed to channel medical resources to the grassroots level, especially at the township and village levels,” she said.

Measures listed in the document include leveraging smart and digitalized technologies to deliver healthcare services. “Technologies such as remote consultation, the appointment-based transferral of patients, online follow-up consultations and remote examinations

should be promoted, and the use of artificial intelligence-assisted diagnoses should be accelerated at rural healthcare institutions,” the report stated.

In Zhejiang’s mountainous Shaoan township, the 50-minute ride to the county seat hospital in Jingning She autonomous county made it difficult for 77-year-old Liu Yuyu to see doctors when he was having trouble controlling his high blood pressure.

“I grew used to putting up with discomfort from my condition for as long as I could,” he said. “But now, using the remote diagnosis platform set up in the nearby clinic, I am able to see doctors from top hospitals in Hangzhou without needing to leave town. It’s marvelous.”

Lei Yehua, a rural doctor in Shaoan township, who helps facilitate remote consultation sessions, said: “We grassroots doctors have also learned a lot by being able to discuss cases with specialists from larger hospitals.”

Local authorities said that since the remote medical service was launched at Jingning county hospital in late 2022, it has diagnosed 300 patients, and provided health management advice for 1,500 people in the jurisdiction. It is estimated that patients living in remote areas have saved around 700,000 yuan (\$101,000) on travel expenses as a result.

In addition, the document highlighted the need to improve incomes and benefits for rural doctors in order

to encourage more medical professionals to work in the countryside.

It suggested that local authorities raise subsidies and arrange accommodation for rural health workers in far-flung and impoverished areas, especially in less developed middle and western provinces and also requested that local governments increase the pensions of rural doctors currently aged 60 or above.

Mou Shanyong, deputy director of the Shandong Health Commission said last month that the province has designated 407 hospitals to serve as training centers for grassroots medical workers to make it simpler for them to improve their medical skills.

## Medical circuits to serve isolated and remote villages without resident doctors

By WANG XIAOYU

China plans to institutionalize sending rural doctors to isolated and remote areas on a regular basis by 2025, as part of efforts to address the shortage of medical workers in the most undeveloped areas of its countryside, according to a recent circular.

For villages with small populations where recruiting a rural doctor is not viable due to limited demand, as well as for relocated communities that do not yet have their own medical facilities, local health authorities are to arrange for township-level health centers to set

up a medical services circuit, and for county-level health institutions to offer technical support.

The circuit team should comprise clinical physicians, TCM doctors, nurses, public health specialists and support staff. They should offer their services at least twice a week, with each round lasting no less than half a day, according to the circular.

The circular was released by the National Health Commission in March, in conjunction with the National Administration of Traditional Chinese Medicine and the National Administration of Disease Prevention and Control.

“Medical circuit teams should arrange service hours according to the living and working habits of rural populations, to provide them with access to high-quality, basic healthcare service on their doorsteps,” it stated.

In addition to circuit services, the document stated that medical workers from township-level medical institutions will be dispatched to villages with large populations that have been unable to recruit qualified rural doctors.

“Medical workers sent to village clinics should work at least five days a week, and work in the same village for no less than six consecutive

months,” the circular stated.

In addition, medical circuit teams and aid workers will be tasked with training local doctors to manage common and major illnesses, and will be encouraged to set up telemedicine cooperation networks to offer diagnosis and treatment to patients.

In a statement explaining the rollout of the new document, the commission said that there is currently a marked shortage in healthcare capacity in some rural regions, and becoming a rural doctor has low appeal to job seekers.

“It is likely that the previous situation of villages without local doctors

could reemerge...and so we have introduced these new measures to allocate quality medical services to the grassroots level, and increase the access of rural people to convenient and affordable healthcare services,” it said.

Dai Jianjun, president of the People’s Hospital of Jinxiang County in Jining, Shandong province, told China Central Television that the hospital has opened outposts at 14 township-level clinics and community service centers in Jinxiang county, and regularly dispatches 56 specialists to see patients, visit wards and train rural doctors.

Zhang Xiaojuan, a doctor from

the endocrinology department at Sichuan University’s West China Hospital in the provincial capital of Chengdu, recently participated in a medical assistance program to a far-flung county in Sichuan’s Liangshan Yi autonomous prefecture.

“Through communication with local doctors, we identified new problems, such as the importance of reminding them to identify and transfer patients with rare and chronic disease to higher-level hospitals,” she said, adding that most were used to sending only patients in critical condition to larger hospitals.

### Policy Digest

#### New energy vehicle sales boom in Q1

More than 1.58 million new energy vehicles were sold on the domestic market in the first quarter of this year, a 26 percent year-on-year increase, according to a spokeswoman for the Ministry of Commerce.

NEVs have played a key role in boosting automobile sales in recent years, Shu Jueting told a news conference in late April.

Since China lifted the foreign ownership cap in the NEV manufacturing sector in 2018, foreign investment in actual use has increased by 15.69 billion yuan (\$2.27 billion), Shu said.

#### Guideline aims to improve foreign trade

The General Office of the State Council has released a guideline on strengthening international trade efforts.

According to the document released in late April, all in-person trade exhibitions and fairs in the country should resume. Local governments, institutions to promote foreign trade, chambers of commerce and associated groups should also make more effort to support foreign trade companies in attending trade events abroad.

Authorities should facilitate cross-border business travel, including by speeding up the issue of APEC Business Travel Cards and restoring international passenger flights as soon as possible, according to the guideline.

Chinese embassies and consulates, as well as overseas offices of trade promotion institutions, should create more opportunities and services for foreign trade companies.

The general office urged authorities to stabilize exports to developed economies and help domestic companies expand markets in developing countries and regions such as Southeast Asia.

Authorities should also work to improve the import and export of key products and increase fiscal and financial support for foreign trade companies.

#### Ministry touts events to promote heritage

The Ministry of Culture and Tourism has decided to launch a series of events to promote intangible cultural heritage to mark Cultural and Natural Heritage Day, which falls on June 10 this year.

Key events include National Quyi Week, which will be held in Wuhan, Hubei province. *Quyi*, a traditional Chinese spoken and sung art form, will be performed to promote exchange between different types of *quyi* and showcase achievements in preserving the tradition, the ministry said in a notice released on Friday.

It will also support organizations holding events to commemorate the 20th anniversary of the Convention for the Safeguarding of the Intangible Cultural Heritage, including concerts featuring the *guqin*, a traditional string instrument, and performances of *Kunqu* opera.

An online exhibition of photos and videos will also be held to showcase intangible cultural resources and increase public awareness of their protection.

WANG QINGYUN