

## Original Paper

# The Current Situation of Healthcare Management System in China—Some Reflections

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### **Abstract**

*This article systematically reviews the establishment of China's modern public hospital management system. Through a review of the literature, on-site inspections, interviews, and other methods, the authors mainly introduce the current situation of China's healthcare system from aspects such as the establishment of public hospitals, outpatient and ward settings, medical insurance construction, medical personnel training, drug and consumable management, salary and benefits, research, infection prevention and treatment, and patient satisfaction. The article summarizes and analyzes the problems and underlying reasons in the current situation of Chinese hospitals, aiming to provide references and suggestions for subsequent reforms of the public hospitals.*

### **Keywords**

*China, China's modern public hospitals, healthcare management status, problems of Chinese hospitals, reforms*

## **1. Background**

China's healthcare system has undergone a meticulous transformation from the planned economy era to the market economy reform and opening. Since the reform and opening, especially since the 1990s, China's healthcare system has undergone manifold changes, including medical and health system reforms, the implementation of drug and consumable systems, and the construction of medical insurance systems. These reforms have significantly improved China's medical services and public health levels. Currently, while China's healthcare system is improving its service levels, it also faces some problems. For example, there is uneven distribution of medical resources between urban and rural areas, poor patient satisfaction leading to tense doctor-patient relationships and rising medical costs. Urban medical resources are relatively concentrated, while rural and remote areas lack medical facilities, resulting in uneven medical services. Regarding doctor-patient relationships, patient demand for medical services is strong, but the quality of some medical services varies, and patient satisfaction is low. The issues in China's healthcare system also include medical management, which has a certain difference in coverage and quality of services with other developed countries. As a result, China faces

severe challenges in hospital reform.

## 2. Introduction

Based on data from the United Nations Population Division (UN Population Division), as of 2023, China's population is approximately 1.4 billion, ranking first among countries and accounting for about 18 per cent of the world's total population. Based on gross domestic product (GDP), by 2023, China's economy ranked second in the world, second only to the United States. However, China's total healthcare costs account for about 5-10 per cent of global healthcare costs. The types and numbers of medical institutions in China are summarized in Table 1, while Table 2 displays per capita information about institutions, health personnel and hospital beds. There are currently 1,070,785 medical institutions in China, of which comprehensive hospitals are 20,190, Chinese hospitals 4,779, specialized hospitals 10,000, primary medical institutions 1,016,000, community health service stations 37,000, street health centers 524, township health centers 34,000, outpatient departments (clinics) 362,000. Health personnel are 1,523.75 and health technicians (per 10,000 people) 1,248.83. Health institution bed numbers (per 10,000 sheets) are 1017.37. Hospital bed numbers (per 10,000 sheets) are 800.45. Various medical and health institutions (per 100 million people) are 84.16. Various medical and health institutions (per 10,000 people) are 24,686.21. This is an important reason why China's healthcare system has differences in coverage and service quality compared to developed countries.

**Table 1. Types and Numbers of Medical Institutions in China**

SL	Types	Numbers
1	Comprehensive hospitals	20,190
2	Chinese hospitals	4,779
3	Specialized hospitals	10,000
4	Primary medical institutions	1,016,000
5	Community health service stations	37,000
6	Street health centers	524
7	Township health centers	34,000
8	Outpatient departments (clinics)	362,000
	Total	1,070,785

Source: <https://www.stats.gov.cn/sj/> (retrieved on 10 July, 2024).

**Table 2. Information about Institutions, Health Personnel, and Hospital Beds**

SL	Types	Numbers
1	Health personnel (per 10,000 people)	1,523.75
2	Health technicians (per 10,000 people)	1,248.83
3	Health institution bed numbers (per 10,000 sheets)	1,017.37
4	Hospital bed numbers (per 10,000 sheets)	800.45
5	Various medical and health institutions (per 100 million people)	84.16
6	Various medical and health institutions (per 10,000 people)	24,686.21

Source: <https://www.stats.gov.cn/sj/> (retrieved on 10 July, 2024).

### 3. Establishment of Modern Public Hospitals

The establishment of China's modern public hospitals covers multiple levels and types, classified, and graded according to medical service functions and management levels. The main settings and conditions include the following:

#### 3.1 Hospital Level Division

At present, there are three different levels of hospitals in China:

- (i) Level 3 hospitals: Usually large regional or national comprehensive hospitals which are well-equipped, have advanced technology, and are able to provide high-level medical services and teaching and research functions. Examples include, Peking University People's Hospital, Shanghai Jiao Tong University Affiliated Fudan Hospital, etc.
- (ii) Level 2 hospitals: Regional hospitals and county hospitals which provide comprehensive medical services including multiple specialized outpatient, and corresponding hospitalization departments. For example, Nanjing First Hospital, Guangzhou First People's Hospital, etc.
- (iii) Level 1 hospitals: Basic medical and health institutions which mainly deal with common diseases, frequently occurring diseases, and basic medical needs, and are divided into township and community level hospitals. For example, Beijing Chaoyang District Hospital of Traditional Chinese Medicine, Pudong New Area People's Hospital in Shanghai, etc.

#### 3.2 Outpatient and Ward Settings

(i) Outpatient departments:

Chinese hospitals usually have outpatient departments that provide basic outpatient diagnosis and treatment services. Outpatient departments typically include outpatient clinics for different specialties, such as internal medicine, surgery, obstetrics and gynecology, pediatrics, ophthalmology, otolaryngology, stomatology, etc., as well as some characteristic specialties such as traditional Chinese medicine, rehabilitation medicine, etc.

Level 3 hospital outpatient departments: These are found in large cities and hospitals and have outpatient services that are very diverse and complete, such as a provincial-level tertiary hospital in the northwest. It generally divides internal medicine and surgery into the following components: respiratory medicine, chest surgery, digestive medicine, general surgery, cardiovascular medicine, heart surgery, pain medicine, vascular surgery, dizziness medicine, neurology, brain surgery, spine surgery,

pain medicine, tumor surgery, tumor Internal medicine, radiotherapy, chemotherapy, geriatrics, gynecology, obstetrics, pediatric internal medicine, pediatric surgery, neonatal medicine, acute and critical care medicine, chest pain center, CT room, MRI room, radiology, etc. There are more than 40 specialist outpatient clinics, each with corresponding specialists and medical teams that can provide high-level diagnosis and treatment services and treatment plans.

Level 2 hospital outpatient facilities: Regional hospital outpatient departments have the main internal, external, female, child, and other categories of outpatient care, and, according to the regional characteristics of the corresponding outpatient specialist, such as orthopedics, ophthalmology, otolaryngology and so on, required to meet the local residents' basic medical needs and treatment purposes of common diseases.

(ii) Ward Departments: Chinese hospitals also feature various types of wards for the treatment and care of hospitalized patients. These include general wards, VIP wards (such as single rooms or deluxe rooms), and intensive care units. The facilities and service levels of these wards vary depending on the hospital's level and type, with larger comprehensive hospitals generally having more complete facilities.

Hospital Level and Facility Differences: Hospitals in China are categorized into different levels, ranging from county-level hospitals and municipal hospitals to provincial and national hospitals. The outpatient and ward setups differ across these levels. Higher-level hospitals typically boast more advanced facilities capable of providing a wider range of complex medical services.

Ward Management: Hospitals of all sizes require at least one daily ward round by the attending physician to assess patient conditions and update patient records promptly. Additionally, department heads conduct at least one comprehensive ward round per week to oversee overall patient care. Nursing staff conduct at least three daily rounds to monitor patient vital signs and provide specialized care as prescribed. Furthermore, the head nurse performs at least one daily ward round to ensure comprehensive patient care management. Nursing activities typically encompass basic patient life support, vital sign monitoring, and specialized care tailored to each patient's medical needs.

#### **4. Health Insurance Policies and Management Systems**

Health insurance policies and management systems directly impact the operational model, financial status, and quality of medical services in hospitals. Here are some of China's major current health insurance policies and management systems:

##### *4.1 Basic Medical Insurance System*

China's basic medical insurance system includes Urban Employee Basic Medical Insurance, Urban Resident Basic Medical Insurance, and the New Rural Cooperative Medical Scheme (NRCMS). These systems cover the majority of the urban and rural residents and form the foundation of China's healthcare insurance system.

##### *4.2 Payment Methods in Health Insurance*

Health insurance payment methods primarily include Diagnosis Related Groups (DRGs) payment, per capita payment, and per diem payment. These payment methods vary across regions and healthcare institutions, affecting the hospital's revenue sources and the delivery of medical services.

##### *4.3 Adjustment of Health Insurance Policies*

The government regularly adjusts and reforms health insurance policies to meet the needs of socioeconomic development and changes in population structure. Adjustments such as reimbursement

rates for specific diseases and revisions to the drug list directly impact hospital drug usage and treatment plan choices.

#### *4.4 Health Insurance Management System*

The health insurance management system involves the management of fund receipts and expenditures, cost control, and quality assessment of medical services, among other aspects. Health insurance management departments play a crucial role in supervising hospitals' adherence to health insurance policies, ensuring the reasonable use of health insurance funds, and the effective allocation of medical resources.

#### *4.5 Inter-Provincial Medical Treatment*

To facilitate insured individuals seeking medical treatment across provinces, China has implemented a policy for direct settlement of medical expenses incurred out of the home province. This requires hospital management systems to facilitate inter-provincial recognition and settlement of health insurance information, placing higher demands on hospital management information systems.

### **5. Medical Staff Training**

Chinese hospitals place significant emphasis on training medical staff because they directly engage in medical services, impacting patient health and safety. Here are several key aspects of training management for medical personnel in Chinese public hospitals:

#### *5.1 Training Content and Methods*

Chinese hospitals typically include the following in their training for medical staff:

##### (i) Basic Training

Newly hired medical staff are given basic training covering hospital regulations, workflows, safety procedures, and other relevant protocols. These trainings are usually organized and implemented by the hospital's human resources department or dedicated training departments.

##### (ii) Professional Skills and Safety Protocols

For instance, doctors may undergo training on new treatment methods and technologies, while nurses learn clinical nursing skills and medication management. Training methods include classroom sessions, on-site internships, simulated exercises, and other forms to ensure that medical staff can flexibly apply learned knowledge in practical settings.

#### *5.2 Continuing Education and Professional Development*

Given the rapid advancements in medical knowledge and technology, hospitals offer continuous education and further learning opportunities for medical staff to stay updated with the latest medical developments and enhance their skills. This includes attending academic conferences, training courses, and opportunities for further study at leading medical centers domestically and internationally. Regular assessments and feedback promote professional development and career growth among medical staff.

#### *5.3 Emergency Response and Team Collaboration*

(i) Medical staff need to respond swiftly in emergency situations. Therefore, hospitals conduct regular emergency drills and training to enhance team collaboration and response capabilities, ensuring that medical personnel can effectively handle unforeseen circumstances to safeguard patient and staff safety.

(ii) Training in communication and interpersonal skills is essential as medical professionals regularly interact with patients, their families, and other healthcare team members. Hospitals provide relevant training in communication techniques and interpersonal relationship management, enhancing both

clinical and teamwork capabilities.

#### *5.4 Training Effectiveness Evaluation and Quality Control*

Hospitals establish mechanisms to evaluate the effectiveness of training, utilizing methods such as examinations, case analyses, simulated exercises, etc., to assess the outcomes of training efforts. Continuous improvement of training content and methods based on feedback ensures sustained enhancement of training quality and effectiveness. Some regions require medical staff to undergo periodic professional certification examinations to maintain their professional standards and practical abilities.

#### *5.5 Record Management and IT Support*

Utilizing information technology supports training management by establishing electronic training record systems, facilitating the management and tracking of each medical staff member's training history and performance. This enhances data security, accuracy, and enables hospitals to conduct statistical analysis and engage effectively in strategic planning.

#### *5.6 Legal and Ethical Issues*

In managing training for medical staff, hospitals must fully consider legal and ethical issues. Ensuring that training content complies with legal regulations and ethical requirements while protecting the legal rights and interests of both medical staff and patients is of paramount importance.

In conclusion, training management for medical staff in Chinese hospitals is not only crucial for improving healthcare services quality and patients' safety but also is essential for promoting professional development and continuous education within medical teams. Through effective and scientific training management, hospitals can better address challenges and transformations in the healthcare industry, elevating overall management standards and service quality.

## **6. Medication and Consumables Management**

### *6.1 Medication Management*

The current medication management system in Chinese hospitals includes the following matters:

- (i) Procurement and Supply Chain Management: Hospitals need to establish a robust medication procurement system to ensure the quality and timely supply of medications. Factors such as efficacy, cost, and supplier reputation need consideration during the procurement process.
- (ii) Inventory Management: Effective medication inventory management is crucial to ensure an adequate supply of commonly used medications and proper disposal of expired ones. Establishing appropriate inventory control strategies helps prevent disruptions due to shortages or expired medications.
- (iii) Usage Guidelines and Standardization: Developing medication usage guidelines and standardized processes clarifies indications, dosages, routes of administration, etc., ensuring the safety and consistency of medication use.
- (iv) Medication Safety and Monitoring: Implementing a medication safety monitoring system involves regular monitoring and reporting of adverse events and side effects, enabling timely measures to mitigate and reduce iatrogenic risks.

### *6.2 Consumables Management*

At present, consumables management in Chinese hospitals is based on the following principles:

- (i) Procurement and Inventory Management: Hospitals arrange procurement and inventory management of consumables based on clinical needs and usage frequency, as ensuring an adequate

supply of various consumables while controlling inventory costs and waste is essential.

(ii) **Quality Control and Standardization:** Hospitals strive to ensure that consumable quality meets national standards and hospital requirements, establishing standardized operating procedures for consumable use to minimize issues arising from improper usage.

(iii) **Consumption Monitoring and Efficiency Improvement:** Hospitals give emphasis to optimizing inventory management strategies by monitoring consumption levels and trends to enhance inventory turnover rates, efficiency, and cost-effectiveness.

(iv) **Safety and Management of Consumables:** Hospitals must strengthen measures for consumable safety management to prevent patient safety risks due to issues related to consumable quality or operational errors.

Implementing these measures in medication and consumables management enables hospitals to effectively enhance efficiency in their use, reduce costs, and ensure the quality and safety of medical services. These efforts align with the overall strategic objectives of hospital management.

## **7. Remuneration and Management System for Medical Staff**

In China, the remuneration and management system for medical staff is a critical and complex topic within hospital management. The composition structure and management policies of medical staff salaries in China involve the following matters:

### *7.1 Composition and Structure of Remuneration*

(i) **Basic salary:** The base salary of Chinese medical staff is typically determined based on factors such as professional title, job position, and years of service. It constitutes the primary component of their remuneration.

(ii) **Performance-based pay:** Performance-based pay is distributed in some cases based on individual job performance and hospital performance assessments, reflecting contributions in clinical services, research, teaching, etc.

(iii) **Bonuses and allowances:** Medical staff may also receive one-time bonuses and various allowances, such as housing subsidies, transportation allowances, etc., to supplement their base salary and performance-based pay.

### *7.2 Management System and Policies*

(i) **Compensation management policies:** Hospital compensation management policies include mechanisms for salary adjustments, performance evaluation criteria, and reward measures to incentivize medical staff to enhance service quality and work efficiency.

(ii) **Welfare benefits and career development support:** In addition to salaries, hospitals provide comprehensive welfare benefits and support for career development, such as training opportunities, academic exchanges, and career advancement pathways to enhance job satisfaction and professional competence among medical staff.

## 8. Research Requirements and Management System in Chinese Hospitals

In China, the importance of research capability in hospitals is increasingly emphasized, serving not only as a crucial guarantee for improving medical standards but also as a reflection of hospital academic reputation and competitiveness.

### 8.1 Core Content of Research Requirements

In Chinese hospitals, the following matters are essentially required in medical research:

- (i) Integration of Academic Research and Clinical Practice: Chinese hospitals generally require the integration of academic research with clinical practice to promote the translation and application of research findings, thereby enhancing the overall therapeutic capabilities of the hospital.
- (ii) Evaluation Criteria for Research Projects and Achievements: Research projects typically need to meet national and local policy requirements, including the rationality of project design, scientific rigor of research methods, and practicality and innovation of outcomes.

### 8.2 Research Management Systems and Policies

- (i) Project Initiation and Management Process: Hospitals usually establish project initiation processes and management systems for research projects, including stages such as project proposal, peer review, fund management, and outcome evaluation, ensuring standardized and effective conduct of research activities.
- (ii) Incentives and Support Policies for Researchers: To encourage innovation and effort among researchers, hospitals devise policies such as allocation of research funds, rewards for academic achievements, and assessments for professional titles, aiming to enhance researchers' motivation and innovative capabilities.

## 9. Infectious Disease Management System

Infectious disease management holds a crucial position within Chinese hospitals, influencing both public health safety and directly impacting medical quality and patient safety within hospital premises. At present, this involves the following:

### 9.1 Importance of Infectious Disease Management

Infectious disease management is integral to hospital management in China, playing a critical role in maintaining internal hospital environments and public health. Establishing and improving infectious disease management systems in Chinese hospitals not only effectively prevents and controls disease transmission but also enhances medical service quality and patient satisfaction.

### 9.2 Implementation Measures

- (i) Infectious Disease Prevention and Control Policies and Regulations: Chinese hospitals adhere to national and local health department policies and regulations to develop and implement infectious disease prevention and control measures. This includes establishing prevention and control standards tailored to different infectious diseases to ensure hospitals have systematic approaches for handling outbreaks.
- (ii) Hospital Infection Control Committees: Most hospitals establish infection control committees responsible for supervising and coordinating infectious disease prevention and control efforts. These committees consist of hospital leaders, infection control specialists, and department heads who regularly assess and enhance prevention and control measures.



(iii) **Infectious Disease Monitoring and Reporting Systems:** Hospitals establish robust infectious disease monitoring and reporting systems to promptly collect and report epidemiological information. Effective information management and communication enable hospitals to respond swiftly to and manage infectious disease outbreaks, thereby preventing their spread.

(iv) **Internal Environmental and Facility Management:** Enhanced cleaning and disinfection management of hospital environments and facilities ensures safe use of medical instruments, beds, and other equipment. Strict disinfection measures and isolation management are particularly implemented in high-risk areas such as intensive care units and operating rooms.

The infectious disease management system in Chinese hospitals serves as a vital safeguard for hospital operations and patient health. By establishing comprehensive policies and regulations, forming specialized committees, strengthening monitoring, and reporting systems, and enhancing internal environmental management, hospitals effectively prevent and control the spread of infectious diseases, thereby improving service quality and societal reputation.

## **10. Current State of Patient Satisfaction in Chinese Hospitals**

### *10.1 Overall Satisfaction Level*

**Satisfaction Status:** Overall, there are certain differences in patient satisfaction levels with hospitals in China, mainly influenced by factors such as hospital type (e.g., tertiary hospitals vs. grassroots hospitals), geographical location, and the quality of medical services. In large cities, tertiary hospitals generally exhibit higher overall satisfaction among patients due to advanced medical equipment and technologies. Conversely, satisfaction may be relatively lower in grassroots and remote area hospitals, primarily due to resource constraints and variations in service quality.

### *10.2 Factors Influencing Satisfaction*

(i) **Medical Service Quality:** The quality of medical services is a key factor influencing patient satisfaction. This includes the professional competence of doctors, quality of nursing care, hospital environment comfort, and the efficiency of diagnostic and treatment processes, all of which directly impact patient experience and satisfaction.

(ii) **Communication and Attitude:** The quality of communication between doctors and patients, the service attitude of medical staff, and the degree of attention given to patient concerns are also crucial factors affecting patient satisfaction. Good communication and care significantly enhance overall patient satisfaction.

(iii) **Waiting Time:** The waiting time for patient visits directly affects their satisfaction. Prolonged waiting times often lead to patient dissatisfaction, particularly in outpatient and emergency services.

### *10.3 Medical Costs*

**Cost Issues:** The cost of medical treatment and the adequacy of medical insurance reimbursement policies significantly influence patient satisfaction. High medical costs or inadequate medical insurance coverage can lead to patient dissatisfaction, especially in cases of long-term treatment or chronic illnesses.

### *10.4 Hospital Facilities and Environment*

In China, hospitals attach very high importance to the following factors:

(i) **Hardware Facilities:** The hospital's infrastructure, including the comfort of patient wards and the sophistication of medical equipment, directly impacts patient satisfaction. Modern equipment and a comfortable environment generally enhance overall patient satisfaction.

(ii) **Hygiene Conditions:** The hospital's hygienic conditions, including cleanliness and ward management, directly impact patient healthcare experiences and satisfaction. Good hygienic conditions enhance patient trust and satisfaction with the hospital.

In summary, to enhance patient satisfaction in Chinese hospitals, in addition to improving medical service quality and hospital facilities, attention is being given to improving communication, service attitude, controlling medical costs, and reducing waiting times. These improvements not only enhance overall patient healthcare experiences but also contribute to improving the hospital's service quality and reputation.

## 11. Summary and Conclusion

Following reforms, management, and professional standards in public hospitals in China have improved notably, with comprehensive training for medical staff. Currently, China boasts high levels of medical expertise in some hospitals, and satisfaction with salary distributions in certain institutions is satisfactory. However, some significant issues persist, including uneven distribution of medical resources, poor patient satisfaction, and inadequacies in the medical insurance system. Below are those notable issues and their proposed solutions.

### 11.1 Uneven Distribution of Medical Resources

Many large cities and developed regions have sufficient resources in public hospitals, whereas rural and remote areas face shortages. This disparity is evident in medical facilities, professional talent availability, and accessibility of medical services. The root causes include population density differences, and economic development gaps, exacerbated by historical policies that concentrated resources in urban areas.

Our proposed improvements are in this case are, namely (a) to develop balanced policies for distributing medical resources, incentivizing healthcare professionals and resources to rural and remote areas through financial subsidies and incentives; (b) to enhance capabilities of grassroots medical services by improving infrastructure and staff training, using telemedicine and information technology to narrow urban-rural healthcare disparities; (c) to optimize medical resource allocation policies based on population distribution and actual demand to elevate overall healthcare service levels; and (d) to strengthen management and supervision of public hospitals to ensure fair distribution and efficient use of medical resources, preventing waste and misuse.

### 11.2 Poor Patient Satisfaction

Factors contributing to low patient satisfaction include poor service attitudes during medical activities due to work pressure or other factors, disparities in medical quality across institutions, and insufficient transparency in medical information.

Our recommendations are: (a) enhancing service awareness and skills through training for healthcare staff, emphasizing patient-centric care to improve communication skills and service attitudes; (b) simplifying medical procedures to reduce patient waiting times and bureaucratic processes, thereby enhancing medical service efficiency and patient satisfaction; (c) establishing effective doctor-patient communication mechanisms to foster trust and reduce misunderstandings; (d) implementing a robust medical quality assessment system with regular evaluations and patient feedback mechanisms to identify and promptly address issues, ensuring continuous improvement in medical quality and patient satisfaction; and (e) increasing transparency by publicly disclosing hospital treatment processes, fee standards, and medical technology levels to boost patient trust and satisfaction.

### 11.3 Issues in the Current Medical Insurance System

Challenges in the current medical insurance system include inadequate coverage, particularly in rural areas and for specific demographics, low reimbursement rates, especially for high medical expenses, imbalanced operation of medical insurance funds, and complex reimbursement processes.

Our proposed solutions are: (a) Expanding medical insurance coverage, especially for rural areas and low-income groups, ensuring universal access to basic medical protection; (b) increasing reimbursement rates, particularly for major illnesses and basic medical expenses, to alleviate patient financial burdens and enhance the fairness and sustainability of the medical insurance system; (c) optimizing medical insurance fund management by strengthening supervision, implementing rational fund adjustment mechanisms to balance income and expenditure, preventing regional overspending and fund wastage; (d) simplifying reimbursement processes and payment methods using information technology to improve efficiency and reduce administrative costs for hospitals and patients; and (e) strengthening government coordination and oversight of medical insurance policies to ensure fairness, effectiveness, and consistency across regions and institutions.

In conclusion, amidst China's robust economic development and high-level national emphasis on healthcare, public hospitals are undergoing steady reforms. Addressing the aforementioned challenges through targeted reforms in policies, management, and systems will undoubtedly enhance medical service efficiency and quality, meet basic medical needs, and achieve the goal of universal healthcare for all citizens in this country.

### References

- Hu, M., Chen, W., & Yip, W. (2021). *Hospital Management Practices in County-Level Hospitals in Rural China and International Comparison (September 23)*. Retrieved August 5, 2024, from <https://www.researchgate.net/publication/354796027>
- Huang, Z., & Lu, X. (2010). The competency of the Executives of Large Public Hospitals. *Medicine and Society*, 023(005), 61-63.
- Li, L., & Fu, H. (2017). China's Health Care System Reform: Progress and Prospects. *International Journal of Health Planning and Management*, 32(3), 240-253. <https://doi.org/10.1002/hpm.2424>
- Peking University (undated). (n.d.). *Global Hospital Management Survey—China, Management in Healthcare Report*. National School of Development, China Center for Health Economic Research. Retrieved August 7, 2024, from [https://www.hbs.edu/faculty/Shared%20Documents/conferences/2014-world-management-survey/GlobalHospital\\_Management\\_Survey\\_Horak.pdf](https://www.hbs.edu/faculty/Shared%20Documents/conferences/2014-world-management-survey/GlobalHospital_Management_Survey_Horak.pdf)
- Sun, D. (2012). *Research on the Duties and Competence Standards of the Executive of Public Hospitals in China* (Doctoral Thesis). Shandong University (in Chinese).
- Wang, M. et al. (2022). Medical Disputes and Patient Satisfaction in China: How does Hospital Management Matter. *International Journal of Health Planning and Management*, 37(3), 1327-1339. <https://doi.org/10.1002/hpm.3399>
- Xia, Y., Ying, Z., & Kuppaswamy, M. (2024). *Professional Management Competence of Chinese Hospital Executives: An Analysis* (Vol. 3). <https://doi.org/10.56294/sctconf2024592>
- Yip, W. et al. (2019). 10 Years of Health-care Reform in China: Progress and Gaps in Universal Health Coverage. *Lancet*, 1192-1204. [https://doi.org/10.1016/S0140-6736\(19\)32136-1](https://doi.org/10.1016/S0140-6736(19)32136-1)

- Zhang, Guang-Wei et al. (2023). The “Trinity” Smart Hospital Construction Policy Promotes the Development of Hospitals and Health Management in China. *Front. Public Health*, *11*, 1219407. <https://doi.org/10.3389/fpubh.2023.1219407>
- Zhao, J. H. et al. (2023). What Makes a Hospital Excellent? A Qualitative Study on the Organization and Management of Five Leading Public Hospitals in China. *Risk Management and Healthcare Policy*, *16*. <https://doi.org/10.2147/RMHP.S424711>
- Zhu, Y. D. et al. (2021). The Hospital Management Practices in Chinese County Hospitals and Its Association with Quality of Care, Efficiency, and Finance. *BMC Health Services Research*, *21*, Article number 449, May 11. <https://doi.org/10.1186/s12913-021-06472-7>