

Editorial

Standards for Better Health

Health care systems worldwide are striving to improve the quality of healthcare in an atmosphere on Evidence Based Medicine and Evidence Based Healthcare. Healthcare is constantly evolving sharing the strain of development in a larger world that is changing at incredible speed. Because of all the changes in healthcare, the ways in which quality is perceived, pursued, and insured continues to develop. The process of development coupled with increasing liberalization and globalisation across India has enabled consumers to realize their increasingly important role in society and governance. The consumer movement in India is as old as trade and commerce.

Standards of health profoundly influence economic performance and quality of life. Quality management has become a major concern in the delivery of health care. Concerns about increasing costs combined with an increasing appreciation of the variability in health care delivery practices has led to the development of strategies to better standardize health care delivery. An organization's quality system consists of the management philosophy, vision, and corporate strategies by which the organization conducts itself and allocates resources to satisfy patient requirements. To excel at meeting patient needs health care organizations must constantly improve system to serve customers.

Healthcare professionals, healthcare systems, healthcare organizations, are all in a state of evolution. They share the strain of development in a larger world that is changing at incredible speed. Nearly everyone involved in the practice of Medicine is highly trained and committed to providing high quality of care. Because of all the changes in healthcare, the ways in which quality is perceived, pursued, and insured continues to develop. Historically, much of what has driven the changes in healthcare has been the need for insuring quality across the entire healthcare system.

Quality Health Care means doing the right things the right the first time. A quality system invokes the standards that the organization monitors to guide and regulate all of its activities that create a quality service. It is important to distinguish between quality of health (encompassing health status assessment) and quality of health care (encompassing the structures, processes, and outcomes of health care). The application of health, health care needs assessments bridges these two areas. The ultimate delivery of health care quality depends as much as on analysis of the delivery and outcomes of the health care for groups of patients (medical care epidemiology) as on analysis of the care of individuals.

Standards of Practice continue to evolve. New diagnostic and therapeutic interventions are continually being developed. Benchmarking refers to the process by which performance is compared to a standard. Re-engineering refers to a fundamental rethinking and radical redesign of processes to achieve dramatic improvement in performance; when it is adapted to the healthcare delivery process, the term clinical reengineering is used.

While Continuous Quality Improvement (CQI) focuses on industrial methods and Total Quality Management (TQM), on management philosophy, the terms often are used interchangeably because of their shared history and assumptions. These approaches contend that good quality should be designed into products and processes at the start, to prevent problems from ever arising.

Patient focused interventions, regulatory involvement (acceptable standards), incentives, IT-based interventions, organizational interventions (culture change and Quality Management philosophy) - changing organizational behavior (clinical audit, CQI), and Healthcare delivery models (innovative interventions in resourcing, organization and delivery of services) can go a long way to improve the quality. Quality can be maintained if there exist a suitable set of laws on consumer protection, provided at least these are reasonably well implemented.

Quality improvement is a revolutionary idea in health care. The idea is to raise the level of care - no matter how good it may already be - through a continuous search for improvement. Quality improvement must become an integral and essential part of an institution. Making quality a top priority requires fundamental changes in organizational culture, in goals and guidelines, and in

daily operations. Quality Management must be driven from both the bottom and top of the health system. Persistence is crucial. It remains a challenge to find innovative approaches that improve the quality of health service delivery.

Quality in health care would substantially improve if only some way could be found to secure more comprehensive and systematic uptake of the findings of biomedical research and development through implementation in everyday clinical practice. There is need to developing valid guidelines. Public health should be concerned with not only the health and health care needs of populations but with the quality of care provided to the population. To contribute effectively to improving the quality of patient care it is important that public health physicians develop experience of the methods for achieving improvement.

The dominance of private provision in the health systems of low-income countries makes it vital to conduct more research into understanding and influencing their behavior and to experiment more with alternative strategies. In particular, research is necessary on the success of demand-side strategies, which could both complement and increase the effectiveness of interventions targeted at providers.

The organizational commitment to continuously improve the quality of the patient care is the central concern of health care institutions. CQI relates to the processes for change and institutional development, and focuses on getting the best out of your resources. Quality improvement should be a regular, expected, familiar, inevitable part of professional life. A holistic view of quality is one that emphasizes the results of addressing trends and improvements over time.

The challenge is to find ways to improve upon the existing situation in the health sector. A potential for improvement exists in areas including the overall costs of care, financial equity, and the quality of care. A sustained improvement in these areas would play a significant role in advancing the primary goal of health policy - health, itself.

Quality Management in health care is critical - meeting or exceeding the needs of consumers, professional care excellence, optimal utilization of resources, safety of customers, trust, transparency, communication (transactions), benchmarking, ISO certification with legal compliance. Accreditation and Regulating Healthcare is essential and includes feasibility, orientation, review planning, review documents, audit, continuous quality improvement, user focus in terms of access and cost.

Quality is one of the major cornerstones of healthcare along with Access to Services and Cost. Quality improvement is a continuous effort by all the members of an organization to meet and exceed the needs and expectations of the patients and other customers. The challenge is to find ways to improve upon the existing situation in the health sector. A potential for improvement exists in areas including the overall costs of care, financial equity, and the quality of care. A sustained improvement in these areas would play a significant role in advancing the primary goal of health policy – health, itself.

Putting patients first is the key to improving the quality of health. Planners, managers, and providers can design and offer services that both meet medical standards and treat clients as they want to be treated. Adopting a client-centered approach often requires a shift in attitudes.

Quality design is put into practice through guidelines. Service *protocols* give providers step-by-step instructions for performing tasks.

There are many ways to improve quality, such as enforcing or revising standards, strengthening supervision, and asking managers or technical experts to redesign a process. The concept of Quality Improvement (QI), which is grounded in the quality movement in industry, usually involves a team-based problem-solving approach, however.

A growing number of health care organizations have adapted the principles of team-based problem-solving. While QI initiatives in developing countries are too recent to demonstrate long-term health impact, there is evidence that the team-based approach has helped individual facilities and entire programs use resources more efficiently and improve administration and service delivery.

A number of QI approaches have been developed that follow the same general steps: identify problem areas, analyze the root causes of the problem, design and implement solutions and evaluate and refine the solution.

It remains a formidable challenge to find innovative approaches that improve the quality of health service delivery. QA must be driven from both the bottom and top of the health system if it is to become an integral part of the health delivery system. Resource people are required at national, regional and district level to support the QA process. A National QA committee would be an appropriate body to have this responsibility. At Regional level a quality strategy group should monitor quality and provide supportive supervision to districts. A regional training programme should reflect the national strategy with quality indicators and standards based on regional priorities. At District level a quality steering team should support facility-level quality improvements. To support consistent goals for quality across the district, this quality steering team should facilitate effective communications between primary and secondary level facilities. At Facility level an interdisciplinary QA team should be responsible for continuously monitoring, assessing and improving quality.

QA packages should be locally developed and flexible rather than imported "off-the-shelf" packages. A QA strategy should start with a client focus. Establishing a quality culture in the health service enables staff to view patients as clients and promotes a more respectful attitude between staff and patients. National policy makers, senior managers and doctors all need to champion QA; otherwise success will be partial. Interdisciplinary QA teams represent the best mechanism for driving the QA process, since most quality problems cross traditional professional boundaries.

Healthcare Governance

Quality management is a key concept in the health care system. Better performance is the key to top class services, and we need to focus more sharply on performance systems. Working practices should be in place to enable probity, quality assurance, quality improvement and patient safety to be the central components of all routines, processes and activities.

Patients have a right to take it as a given that every effort is made to ensure that their care and treatment is both safe and effective. Standards for Better Health should have, at its heart, the development of safe high quality. Patient safety is enhanced by the use of health care processes, working practices and systemic activities that prevent or reduce the risk of harm to patients. Patients achieve health care benefits that meet their individual needs through health care decisions and services based on what assessed research evidence has shown provides effective clinical outcomes.

Managerial and clinical leadership and accountability, as well as the organisation's culture, systems and working practices ensure that probity, quality assurance, quality improvement and patient safety are central components of all the activities of the health care organisation. Patients receive services as promptly as possible, have choice in access to services and treatments, and do not experience unnecessary delay at any stage of service delivery or of the care pathway.

The focus should be directed towards executive management, culture, organizational design, incentive structure and information technology. Various interventions include: Patient focused interventions, Regulatory involvement (acceptable standards), Incentives, IT-based interventions, Organizational interventions (culture change and Quality Management philosophy)- changing organizational behavior (clinical audit, CQI), and Healthcare delivery models (innovative interventions in resourcing, organization and delivery of services).

Science and technology have profoundly influenced the course of human civilization. The governments should ensure the fullest use of scientific developments for the well-being of people and whole of human kind. We must take science to the people. Bright future can be realized only when science is in league with the majority of our society.

Future Challenges

As healthcare becomes increasingly complex and dispersed across multiple settings, what organizational characteristics are required to promote synergy between the many policy levers that can influence care delivery? There is only one way to know if a change represents an

improvement: measurement. It is important to track both process and outcomes measures when you are working to improve. For quality improvement to have a broad and lasting impact, it must become an integral and essential part of an institution. Every member of the organization must believe that good care not only is possible but also is a top priority for them and for the organization. Making quality a top priority requires fundamental changes in organizational culture, in goals and guidelines, and in daily operations. Persistence is crucial. Quality Assurance institutionalisation is an ongoing process where activities related to quality management become integrated into the structure and functioning of a health care delivery system.

Science and technology have profoundly influenced the course of human civilization. Science promises its unlimited potential to bring revolutionary changes in human lives for better. The governments should ensure the fullest use of scientific developments for the well-being of people and whole of human kind.

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