**QUALITY MANAGEMENT IN HEALTH CARE**

**Introduction**

The quality refers to how well a service performs its intended function, including whether it satisfies the customer and has the desired features. Quality is "the extent to which health care services for individuals and populations increase the likelihood of desired outcomes and are compatible with current professional knowledge," according to the Institute of Medicine (IOM). There is no longer exist a matter of whether it's time to introduce quality into the healthcare sector but rather how to go about doing it given that businesses now need to raise the quality of their products and services in order to compete in the highly competitive global market of today .Thus, it is now quite clear why quality is engrained throughout the healthcare system and why it is essential for the purpose of providing healthcare services provided to each and every individual client or patient.

**Concepts of quality management in health care**

Most experts now acknowledged that a paradigm shift in the industry has been brought about by the establishment and implementation of a quality management system in healthcare businesses. Quality management has an impact on practically every system and area of the business, including the ownership and customer (patient/client) interactions.. In light of this, it makes sense that business organization has advanced significantly over the past couple of decades, leading to a situation where firms are increasingly focused on processes rather than organizational structure. Over the past few decades, The importance of quality in healthcare organizations has been studied by some of the greatest academics, researchers, and practitioners in the world. Numerous researchers have worked to develop, enhance, and put into practice various quality management systems that would aid in determining the best course of action for each patient. The literature on quality, however, despite its continuous popularity, shows that the standard of quality of healthcare services has not yet been fully established. Despite the unknowns, there is still one essential strategy that needs to be discovered in order to eliminate all current medical mistakes and failure factors.

1. The healthcare services are unique due to the patients' physical and mental activity while providing services. To put it another way the provision of medical services is dependent on constant contact between patients or consumers and medical professionals (such as doctors or medical technicians).
2. Healthcare services are defined by the intricate interactions and relationships that exist between patients, clients, doctors and other healthcare providers, non-medical and medical suppliers of supplies and resources, healthcare insurance, governmental and other regulatory bodies, and healthcare providers.

**The principles of quality management**

1. **Customer-focused:** Every healthcare facility, whether public or private, just like any other organization must adhere to the customer centric approach when providing healthcare services. As one of the primary forces behind the reform of healthcare services, this strategy is a crucial goal in the development of both public and commercial services. Customers are the reason such businesses exist, thus it is important to pay close attention to their wants, needs, and expectations. Indeed, as the renowned professor Deming often said, "everything starts and ends with the customer," earning him the moniker "the individual who contributed to the achievement of the Japanese quality revolution the individual who contributed to the achievement of the Japanese quality revolution "To satisfy every requirement of the healthcare environment as well as the general population.", it is vital to develop and adapt healthcare services.
2. **Stakeholder participation-** Customers' wishes and requirements should not be the only ones considered. For a company's performance in both financial and nonfinancial terms, Employees, local and global communities, investors, and society at large must all receive enough value. Thus, it is frequently required to identify the wants, The customer or client, the doctor, and the physician, in addition to the service provider and health insurance, are just a few of the stakeholders and interested parties who have expectations and needs that must be met in order to develop the healthcare service. The customer or client, the doctor, and the physician, in addition to the service provider and health insurance, are just a few of the stakeholders and interested parties who have expectations and needs that must be met in order to develop the healthcare service.
3. **Leadership-** Strong leadership is necessary for both the management of healthcare organizations and the quality management system of those organizations that embraced a customer-centered strategy. The duty of leaders is to encourage, advance, and support the quality-oriented company culture. According to Filipovi et al., improving the quality of healthcare services is not just the responsibility of doctors. According to the same authors, managers and doctors both contribute equally to quality improvement in their respective fields of professional activity and quality and safety of all healthcare services.
4. People and care vision- The remarkable function that employees perform in the company defines a man's life and work. Whether intentionally or unintentionally, man generates values, beliefs, and attitudes based on knowledge and makes decisions while being influenced by a variety of external circumstances.
5. **The Orientation Process -** The vast majority of authors have concurred that healthcare services necessitate the execution of integrated and multidisciplinary processes that bring together varied roles, clinical specialty activities, and the variety of healthcare service providers. It's important to comprehend some of the fundamental ideas that the process orientation carries in order to fully comprehend it. For instance, it's important to add new positions like process owner, process bearer, and process executor. Systems of evaluation and awarding must be put in place that will be based on the process's successful completion rather than the accomplishments of the various organizational components.
6. **Guidance through information**- With the help of contemporary information technology, healthcare organizations exchange a wide range of unique healthcare data and offer a wide range of healthcare services. The employment of particular information technologies in the healthcare sector has given rise to an increasing number of international standards, and the ISO organization has even created numerous technical committees in this field. As a result of the standardization of healthcare informatics, data are gathered and disseminated within the industry more effectively.
7. **Partnership for the quality across healthcare services**- in light of healthcare services are frequently complex and coordination between numerous healthcare organizations may occasionally be necessary. When rendering medical services, coordination across a number of different healthcare institutions is sometimes required because the services are often complex. These could be two or three different healthcare organizations, and on occasion, in a regional context, we might discuss a full network of healthcare organizations that, by cooperating at different levels, establish a "partnership for quality throughout healthcare services." Among of this has been done in order to give customers access to comprehensive healthcare and address all healthcare issues with suitable specialized medical knowledge.
8. Continual Improvement- "The organization shall continuously enhance the appropriateness, sufficiency, how well the quality management system works." Therefore, this idea that promotes learning, helps with development, and leads to ongoing healthcare improvement must be a priority for all healthcare organizations.

Organizations that provide healthcare are governed and run in accordance among these eight quality management principles in order to continually enhance performance relevant to patients, clients, as well as other parties involved and interested.

**Standards of quality management**

1. **A quality management system's requirements-**

**a)** It needs to show that it can consistently provide goods and services that meet customers' needs and applicable legal and regulatory requirements.

**b)** seeks to increase customer satisfaction through the effective application of the system, including processes for system improvement and the assurance of conformity to customers' needs.

1. **Quality management system for health care-** It establishes standards for a healthcare organization should use a quality management system when: i) A required to show that it can consistently supply healthcare products and services that fulfil customers' needs as well as applicable legal and regulatory requirements. ii)The objective of this system is to improve customer satisfaction through the application of an efficient system, including processes for system improvement and the assurance of conformity to customer requirements, applicable statutory and regulatory requirements, and requirements related to the quality characteristics, appropriate, correct care, availability, continuity of care, effectiveness, efficiency, equity, evidence-based care, and patient-centered care, including physical and psychological care.
2. **Medical laboratories-** Medical laboratories are required to abide by standards for both quality and competence, which are described in the phrase "Medical Laboratories - Requirements for Quality and Competence." All medical laboratories can utilize it to enhance their quality management systems and evaluate their own ability. Additionally, laboratory clients, various governing organizations, and accreditation bodies can utilize it to certify or recognize the proficiency of medical laboratories.
3. **Medical devices -** Regulation-related requirements-

Quality Management Systems – It specifies requirements for a quality management system where an organization must be demonstrate its ability to consistently deliver medical devices and related services that satisfy customers' requests and applicable regulatory requirements.. A medical device's design and development, manufacture, storage, and distribution, installation, or maintenance, as well as the design and development or provision of related services, such as technical assistance, may be the focus of one or more of these enterprises.

**How the quality is measured**

Depending on the services an organization offers, there are different ways to describe and measure great healthcare. For instance, a surgical center would assess many parts of care very differently than a long-term nursing home or rehab facility. But the patient's experience and the results are what matter most in any assessment of quality.

The Institute of Medicine set six quality standards in 2001 that would influence how healthcare companies will provide treatment and function throughout the ensuing decades. The following are these six traits:

* Safe care is required.
* Care must be dependable and efficient.
* Timely care is required.
* Patient-centered care is required.
* Care needs to be effective.
* Care needs to be fair.

These high requirements for quality affected everything, including hospital’s infection rates and wait times for emergency rooms. In order to compare their results to those of other care facilities, organizations and facilities monitor the outcomes of any service they offer, including surgery, emergency care, chronic illness management, rehabilitation, and even end-of-life care.

**Domains Of Good Health Care**

The purpose of the healthcare system is to provide a particular patient with the best care possible from a certified practitioner in the right environment. To put it another way, the patient should receive the best care (i.e., evidence-based medicine's accepted standard of care) from a provider with the appropriate level of expertise in a setting that maximises the efficiency and minimizes the risk and resource abuse, all the while treating the patient with respect and allowing them to participate in the care plan as they see fit. IOM has recently established six domains that contribute to achieving a high level of quality; these are: safe, effective, patient-centered, timely, efficient, and equitable health care. The core of quality management is addressing each of these domains. "Safe" refers to guarding against patient injury brought on by the treatment they are receiving. Utilizing resources properly while providing treatment that is "effective" "Patient-centered" care refers to treatment that accepts and takes into account the patient's preferences, requirements, and values to inform all clinical judgments. The emphasis of "timely" is on avoiding care delays. Efficiency is the reduction or avoidance of resource waste, including the wastage of materials and time. Finally, "equitable" refers to treating all patients equally, regardless of their social background, looks, or other features.

These "five D's," such as; death (mortality), disability (morbidity), disease (resolution or persistence of disease following treatment), discomfort (the process of providing medical care), and dissatisfaction (the patient's experience during the process of providing care—can be used to measure the success of health care in achieving these quality domains.

**Quality management models and approaches**

There are numerous concepts and methods for quality management. 64 different models were found in a recent analysis of quality management programme for inpatient care, of which 17 were recognized as important to the way healthcare is delivered today. In the section below, we go over a few of the models and associated problems.

Total Quality Management System (TQM) is an "integrated process encompassing all systems and people in a continual attempt to improve quality, lower costs, and increase service to the customer" is TQM. To identify key elements of Total Quality Management in healthcare, researchers conducted a meta-analysis to identify crucial components of TQM success. Some of these included planning, leadership, staff involvement, training, process management, and support from higher administration. To identify key elements of TQM in healthcare, researchers conducted a meta-analysis to identify crucial components of TQM success. Some of these included planning, leadership, participation of staff, training, process management, and support from higher administration. It is interesting to note that a different meta-analysis found reasons why TQM implementation in healthcare failed. These include weak leadership, a lack of a culture that priorities quality, insufficient education and training, insufficient resources, and a lack of staff commitment (particularly from physicians). The similarities between the two studies show what constitutes a fundamental healthcare institution. Success results from the creation of these elements, while deficiency will cause the implementation of TQM to fail.

The Continuous quality improvement (CQI) entails the methodical application of tools and procedures to recognize and analyze weaknesses and obstacles inside an organization, as well as to continuously test and improve results. After World War II, CQI techniques were first used in the business and technical sectors. Over the past few decades, they have been applied to healthcare. The CQI improvement methodology in healthcare enables the integration of the most recent best research with current procedures to improve patient outcomes. Some locations have discovered challenges with CQI while experiencing progress in various facets of healthcare.

The healthcare Organizations Joint Commission on Accreditation. Accreditation of medical facilities has been a different path to Quality Management. An illustration is The Joint Commission is a volunteer organization that upholds, monitors, and improves the medical standards both locally and internationally. It is currently the largest accreditation group in the country, evaluating more than Twenty thousand healthcare companies. The Joint Commission assesses a facility's compliance with accreditation requirements for the quality of healthcare, including the inclusion of the programmes that carry out quality measurement, evaluation, and patient outcome improvement.

**Conclusion:**

Although some settings have seen a tremendous advance in the quality of healthcare, it is equally acknowledged that no one has yet identified the ideal niche. A fundamental strategy that would eliminate all current medical mistakes and failure factors still has to be unveiled in the face of uncertainties. It is believed that the healthcare sector will adopt the ideas, standards, and practices of quality management. It is believed that the healthcare sector will adopt the ideas, standards, and practices of quality management. But in the interim, the authors believe that this paper will be useful for measuring outcomes and establishing a reliable and efficient quality management system in the healthcare industry. Hence, If medical, healthcare, and associated professionals are exposed to quality improvement, they are more likely to gain from improved patient outcomes and satisfaction.

### **REFERRENCES-**

### Filipović, J., Đurić, M., & Ruso, J. (2018). Sistem menadžmenta kvalitetom. Fakultet organizacionih nauka. Beograd.

### Spath, P. (2014). Introduction to Healthcare Quality Management (Vol. 2). Chicago. IL. Health Administration Press.

### Antony, J., Palsuk, P., Gupta, S., Mishra, D., & Barach, P. (2017). Six Sigma in healthcare: a systematic review of the literature. International Journal of Quality & Reliability Management, 35(5), 1075-1092.

### Blozik, E., Nothacker, M., Bunk, T., Szecsenyi, J., Ollenschläger, G., & Scherer, M. (2012). Simultaneous development of guidelines and quality indicators–how do guideline groups act? A worldwide survey. International Journal of Health Care Quality Assurance, 25(8), 712-729.

### Radović, M., & Tomašević, I., & Stojanović, D., & Simeunović, B. (2012). Inženjering procesa. Beograd: Fakultet organizacionih nauka.

### Filipović, J., & Jovanović. B, & Bjelović, M. (2017). Menadžment kvaliteta u zdravstvu. Fakultet organizacionih nauka. Beograd.

### SRPS EN 15224:2017 - Quality management systems - EN ISO 9001:2015 for healthcare.

### Deming, W. E., & Edwards, D. W. (1982). Quality, Productivity, аnd Competitive Position (Vol. 183). Cambridge, MA: Massachusetts Institute of Technology, Center for Аdvanced Еngineering Study.

### Karapetrovic, S. (2002). Strategies for the integration of management systems and standards. The TQM Magazine, 14(1), 61-67.

### Keßler W, Heidecke CD. Dimensions of Quality and Their Increasing Relevance for Visceral Medicine in Germany. Visc Med. 2017 May;33(2):119-124. [[PMC free article](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5447179/)] [[PubMed](https://www.ncbi.nlm.nih.gov/pubmed/28560226)].

### Institute of Medicine (US) Committee to Design a Strategy for Quality Review and Assurance in Medicare. Medicare: A Strategy for Quality Assurance: Volume 1. Lohr KN, editor. National Academies Press (US); Washington (DC): 1990. [[PubMed](https://www.ncbi.nlm.nih.gov/pubmed/25144047)]

### Institute of Medicine (US) Committee on Quality of Health Care in America. Crossing the Quality Chasm: A New Health System for the 21st Century. National Academies Press (US); Washington (DC): 2001. [[PubMed](https://www.ncbi.nlm.nih.gov/pubmed/25057539)].

### White KL. Improved medical care statistics and the health services system. Public Health Rep. 1967 Oct;82(10):847-54. [[PMC free article](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1920087/)] [[PubMed](https://www.ncbi.nlm.nih.gov/pubmed/4964114)].

### Dodwad SS. Quality management in healthcare. Indian J Public Health. 2013 Jul-Sep;57(3):138-43. [[PubMed](https://www.ncbi.nlm.nih.gov/pubmed/24125927)].

### Betlloch-Mas I, Ramón-Sapena R, Abellán-García C, Pascual-Ramírez JC. Implementation and Operation of an Integrated Quality Management System in Accordance With ISO 9001:2015 in a Dermatology Department. Actas Dermosifiliogr (Engl Ed). 2019 Mar;110(2):92-101. [[PubMed](https://www.ncbi.nlm.nih.gov/pubmed/30482386)].

### Gardner DB, Cummings C. Total quality management and shared governance: synergistic processes. Nurs Adm Q. 1994 Summer;18(4):56-64. [[PubMed](https://www.ncbi.nlm.nih.gov/pubmed/8065638)].

### Mosadeghrad AM. Essentials of total quality management: a meta-analysis. Int J Health Care Qual Assur. 2014;27(6):544-58. [[PubMed](https://www.ncbi.nlm.nih.gov/pubmed/25115056)].

### Hines K, Mouchtouris N, Knightly JJ, Harrop J. A Brief History of Quality Improvement in Health Care and Spinal Surgery. Global Spine J. 2020 Jan;10(1 Suppl):5S-9S. [[PMC free article](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6947686/)] [[PubMed](https://www.ncbi.nlm.nih.gov/pubmed/31934523)].

### Awdishu L, Moore T, Morrison M, Turner C, Trzebinska D. A Primer on Quality Assurance and Performance Improvement for Interprofessional Chronic Kidney Disease Care: A Path to Joint Commission Certification. Pharmacy (Basel). 2019 Jul 03;7(3) [[PMC free article](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6789732/)] [[PubMed](https://www.ncbi.nlm.nih.gov/pubmed/31277293)].

### Lam MB, Figueroa JF, Feyman Y, Reimold KE, Orav EJ, Jha AK. Association between patient outcomes and accreditation in US hospitals: observational study. BMJ. 2018 Oct 18;363:k4011. [[PMC free article](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6193202/)] [[PubMed](https://www.ncbi.nlm.nih.gov/pubmed/30337294)].