Steps to be taken to provide quality healthcare

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Introduction

Improvement involves a substantial shift in our idea of the work of healthcare. If healthcare is going to benefit fully from the science of disease biology, we need to be sure that the changes we make systematically incorporate generalisable scientific knowledge. To guide our design of change, we need to characterise the setting in which care is actually delivered (microsystem, mesosystem and macrosystem) in sophisticated ways. 1

Materials and methods

In this fast-growing world, daily we achieve many milestones in the field of medical science, but still there is need for improvement in quality of healthcare and patient safety. Low-quality healthcare, wrong diagnosis, over-use of steroids etc are common problems for almost every country.

According to a report of the World Health Organization, 05 July 2018, 10% of patients are adversely affected during treatment in high-income countries, and nearly 40% of healthcare facilities in low-income countries and nearly 20% of high-income countries lack sanitation.²

Methods by which we can improve quality of healthcare and patient safety

- > Driving improvement through national quality policy and strategy.
- > Setting standards for clinical practice.
- > Engaging and empowering patients, families and communities.
- > Use of continuous quality improvement programmes and methods.
- > Strong legislation and regulations.
- Implementation of medicines, devices and technologies that are safe in design and use.
- > Financing mechanisms that enable and courage high-quality care.
- Need of skilled, motivated and adequately supported health workforce.³

Results and discussion

Case study: Ethiopia – national healthcare quality strategy 2016–2020

Ethiopia is the second most populous country in Africa, with a population of around 100 million. Since 1995, the country's health sector has undergone significant reform through implementation of a Health Care Financing Strategy. The Health Sector Transformation Plan identifies four transformation priority agendas: ensuring the delivery of quality health services

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in equitable fashion; focusing on district-level transformation; strengthening health information systems; and creating a compassionate, respectful and caring health workforce.

Case study: Mexico – national strategy for quality consolidation in healthcare facilities and services 2001

A comprehensive systemwide quality improvement strategy was launched in Mexico in January 2001. The main objectives were to promote quality of care as a core value in the culture of healthcare organisations, both public and private, and to improve the quality of services across the healthcare system.

Discussion

To ensure that multiple levers are used to improve quality in healthcare, governments, policy-makers, health system leaders, patients and clinicians should work together to develop, refine and execute a national quality policy and strategy; adopt and promote universal quality goals; and monitor and report quality of care results for continuous improvement efforts.

Conclusion

Beyond the effect on people's lives, poor-quality care wastes time and money. Making quality an integral part of universal health coverage is also a matter of striving for longer and better lives. Building quality in a health system is affordable for countries at all levels of economic development, in fact, the lack of quality is an unaffordable cost, especially for the poorest countries.

Conflicts of interest

None declared.

References

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