Mini Review

Quality in health care

Abstract
Quality is an assessment of whether a procedure is good enough and whether it is suitable for its purpose. The goal of health care is not only to provide medical services to all who need them, but also these medical services should be of high quality. This aims to ensure good quality of life, cure illnesses when possible, to extend life expectancy, and to gain society development.

Keyword: Psychology • Ontology • Tumours • Micro-skills

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Introduction
Health care quality is the degree to which health care services for individuals and populations increase the likelihood of desired health outcomes and achieve client’s satisfaction. Studying health care quality includes the following topics:

- Audit
- Medical recording
- Key Performance Indicators (KPI)
- Patient safety
- Equity
- Cost-effectiveness
- Patient-centered service
- Strategic planning
- Health Economics

Audit
Audit in healthcare is a process used by health professionals to assess, measure, and improve care of patients in a systematic way. Audit measures current practice against a defined (desired) standard. It forms part of clinical governance, which aims to safeguard a high quality of clinical care for patients. Audit can be used to evaluate various aspects of patient care: structure of care, process of care and outcome of care. Audit is a comprehensive process of the health organization with no naming, no shaming and no blaming.

Audit should be transparent and non-judgmental. The aim is to find out how the present provision compares with the desired standard. This information can then be used to plan improvements in the service [1,2].

Medical records
These are the document that explains all detail about the patient’s history, clinical picture, diagnostic investigation results, pre and postoperative data, patient’s progress and medication. If written correctly, notes will inform and guide the doctor about the correctness of treatment. Inspite of knowing the importance of proper record keeping in Egypt, it is still in the initial stages. Medical records are the most important factor on which every medico-legal battle is won or lost. Medical records form a ‘treasure’ that can be used to produce statistics and research results helping in modifying the health plan and measures. Medical records form should be unified all over the country, should gain health authority interest and must be written accurately by the treating physician. Medical recording forms a great pillar of measuring quality in the organization [3].

Healthcare KPIs
It measure how successful your health-care organization is when it comes to achieving those stated goals. Additionally, they help bring transparency and accountability, leading to better overall delivery of care. By promoting process perfection, healthcare data analytics KPIs offer a clear method towards achieving quick improvements that can have a significant impact on quality of care.

The top KPIs included in a healthcare performance assessment are:

- Patient satisfaction rate
- Bed turnover rate
- Average treatment cost
- Morbidity and mortality rates
- Average length of stay
- Staff satisfaction rate
- Cancelled operations rate
- Hospital acquired infection rate
- Clinical errors rate
- Patients and relatives complaints rate

Measuring the healthcare organization’s performance can help improving services and give a greater understanding of health care activities. The mission of health care organization is to offer the best possible service to patients and clients, and to reduce mistakes.
that could be harmful or life-threatening [4].

**Patient safety**

It is the avoidance of unintended or unexpected mistakes or errors to people during the practice of health care. Patients should be treated in a safe environment and protected from avoidable harm. Also, staff and workers providing the service must be protected from any avoidable harm, they should feel safe and satisfied with the environment and atmosphere where they do their jobs.

The health system patient safety strategy describes how the health system will continuously improve patient and staff safety, building on the achievement of a safer culture and safer systems.

The strategy sets out how the health system will support staff and providers to share safety insight and empower people, including patients and staff, with the skills, confidence and mechanisms to improve safety. Getting this right save lives, efforts, time and money.

The patient safety measures relate to the strategy’s achievement of “patient safety culture” and “patient safety systems”, and the three strategic aims "insight", "involvement", and "improvement"[5].

**Health equity**

It is the state in which everyone has a fair and just opportunity to gain their highest level of health. Achieving this requires ongoing societal efforts to:

- Address the problems and sufferings of injustices.
- Overcome economic, social, ethnic, traditional, cultural and other obstacles to health and health care.
- Eliminate preventable health barriers.
- Share the responsibility about the health services success and improvement.
- Trying to end the social hatred or apartheid social segregation if present.

To achieve health equity, we must change the systems, cultures, laws and policies that have resulted in the generational injustices that give rise to racial and ethnic health disparities [6].

**Cost-effectiveness**

It is achieving the best results by using the least costs. Cost-effective analysis is a way to examine both the costs and the benefits or health outcomes of one or more interventions. It compares an intervention to another intervention by estimating how much it costs to gain a unit of a health outcome, like a life year gained or a death prevented, thus omitting the non-effective procedures and adopting the cost-effective ones [7].

**Patient-centered care**

It is a system where individual’s specific health needs and desired health outcomes are the driving force behind all health care policy, measures, decisions and quality measurements. Patients are partners with their health care providers, and providers treat patients not only from a clinical perspective, but also from an emotional, mental, spiritual, psychological, cultural, social, and financial perspective. Patient-centered and family-centered care encourages the active collaboration and sharing in decision-making between patients, families, and health-care providers to design and manage a customized, effective, directive and comprehensive care plan [8].

**Strategic management**

It is the process of defining the future of the health care system, setting goals that will move the system toward that future, and determining the major projects that will be achieved to meet those goals. It also includes sustaining that strategy focus over a period of 3 years, 5 years, 10 years, 20 years or 50 years. Healthcare system benefits from having a plan for the future, one that all health care providers are aware of and consistently working toward. Strategy should serve as a guideline for all important decisions to make sure the system stays on track.

The strategic planning process naturally includes assessing changes in the external environment and expected emergencies, and thus helps the health care system stay on top of them. It guarantees continuity and provides focus and direction for daily work even as circumstances, internal or external, may change [9].

**Health economics**

It is an applied field of study that allows for the systematic and comprehensive examination of the problems faced in promoting health for all. By applying economic theories of consumer, producer, needs, individual and social choices, health economics aims to understand the behavior of individuals, society, health care providers, public and private clients, and governments in decision-making. Health economics study the personnel, medications, instruments and logistics. It aims at fulfilling and satisfying the needs as much as possible using the available resources.

Health economics is used to promote healthy lifestyles and positive health outcomes by investing the available resources through the study of health care providers, hospitals, clinics, managed care and public health promotion activities. The study of health economics uses health economic principals to address global issues such as migration, displaced persons, poor countries, climate change, vaccine access, wars, mass disasters, injuries, obesity and pandemics.

Health economists apply the theories of production, efficiency, disparities, competition, and regulation in health care planning to better inform the public and private sector on the most efficient, cost-effective and equitable course of action. Health economics studies can include the economic evaluation of new technologies, as well as the study of appropriate
prices, competitive producers, anti-trust policy, optimal public and private investment and strategic behavior.

Research centers in Egypt are conducting research on a wide variety of topics, including the impact of health care, health insurance and preventative services on health lifestyles, as well as providing research and advice to government to plan the most suitable, equitable and sustainable strategy of health care [10].
References