Assignment 3: Healthcare Quality

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**Quality Initiatives**

In an organization, the role of the quality officer is to provide and ensure the best services and products related to healthcare in the hospitals. Being one of the largest healthcare organization, it is the ultimate goal to deliver the best standards of practice to the patients. These issues can be related to medical and non-medical factors (Sherwood & Barnsteiner, 2017). The three essential quality initiative in providing the best healthcare services and amenities to the patients would be; ensuring patient’s safety, efficient laboratory facilities, and introducing newer technologies.

**Ensuring Patient’s Safety**

Nearly four million people die every year due to healthcare negligence in healthcare organizations. Thus patient safety is the need for To provide the quality of patient care in the hospitals it is essential to maintain and develop the infrastructure, personnel competence, training quality, and efficiency of functioning. For achieving such a system, the patient-centered culture in a healthcare organization is essential. Foremost step for providing safety to the patient is by building a rapid method of response and compliance plan. Safe design of the hospital would help maintain the patient’s safety.

**Efficient laboratory facilities**

The testing and screening of the patient is an essential element in and the first step to quality treatment. If the diagnosis goes wrong, ultimately whole treatment is ruined, ultimately worsening the patient’s condition and aggravating the disease. By devising efficient testing services and screening for people, it would enhance the quality of service. The testing services could be enhanced by decreasing cost, increasing revenue and quality improvement.

**Introducing Newer Technologies**

Due to the advancement and uprooting of new diseases, it is inevitable to introduce and implement new machinery and equipment into the hospital along with new technologies. The new ways devised to treat the ailment is one of the vital factors in providing healthcare of the best quality. Other factors like maintaining cost efficiency and skilled personnel, new technologies could be implemented.

**Factors for Cost Reduction**

There are several factors which are detrimental in reducing the cost of healthcare services without decreasing the quality. The health system and hospitals increasingly face the issue of economic pressures due to increased competition, reimbursement and treatment planning. These issues are generally prevalent in non-profit, rural and urban organizations. Following strategies would help the organization to make the services cost-effective beside affecting the quality care:

**Innovations and Staffing Policy**

The innovation is the necessity of any organization, but in hospital care systems this is one of the most impactful steps in reducing the cost. Every healthcare organization essentially requires the refurbishment of employees/staff, interior, and technological renovation. The most significant expense is related to recruiting staff in the organization, therefore by reducing the resources and implementing only the required sources will help in maintaining the financial pressures (Sherwood & Barnsteiner, 2017).

**Labor/Non-labor expenditure**

The expenses of labor should be examined and minimized according to the need and requirement of the organization. The performance cost should be evaluated on a weekly bases and should be measured with the actual cost, i.e., examining the overtime and contract labor cost. While referring to the assessment of non-labor cost, it would be useful in cost-cutting strategy.

**Employee Engagement**

The hospital management should engage employees in maintain the cost effectively by informing them about the agenda of cost-cutting and grasping the ideas they have related to managing the expenditures. The employee should be well-informed of the ongoing financial status of the organization.

**Reducing Irrelevant Expenses**

It is much supportive to eliminate all the unnecessary costs-consuming operations which are not detrimental for the quality care services. This way the patient care would get enhanced and the entire amount would be spent on the better treatment and cure.

**Targeting Growth Opportunities**

By focusing on the expansion prospects in patient care, hospitals would be able to provide the patient with quality care and safety by utilizing resources in a relevant place.

**Comparison of Healthcare Quality**

**Free Market Healthcare System vs. Single Payer Government System**

The healthcare systems are provided by various organizations, for instance, the private and public sector. Besides, it is also provided by healthcare insurance and coverage. The two central healthcare systems include the free-market and single-payer systems and will be compared and contrasted in this section.

The system of Free-Market Healthcare is where healthcare providers and the patients determine the cost through an agreement for the services of healthcare. Irrespective of government intrusion or any other third-party, the patient and free-market decide their cost of treatment. The quality of the free-market system in healthcare can be determined by the following three examples:

1. The consumers have different choices provided by the healthcare professional. These professionals help the patients in choosing the services they want or do not aspire to have.
2. The consumers buy the treatment which is cost effective and is not over-priced, and they could sustain the treatment, along with the worth of the treatment.
3. This system further emphasizes on the effectivity of the cost and consumer relationship. They manage cost-cutting policies very efficiently, alongside with maintaining the quality of services.

Whereas, the healthcare system of single-payer is known as the government based healthcare system, where all the expenses are held by the government. The government affords the prices by the utilization of taxes and government funds. The following examples determine the quality of this healthcare system:

1. This is a single-tiered system, and without discrimination, the government covers the expenses of healthcare services to the patients. This system keeps the quality of care to high so that it is acceptable by every citizen.
2. This also helps in maintaining the affordability and accessibility to each and every citizen.
3. This system enhances the essential components of quality care, such that they focus diseases in the long run.

**Common Laws for Quality Initiatives**

The common law was initiated due to the providence of quality healthcare in the United States (Ogrinc et al., 2015). The law quality initiatives which are still applicable in the twenty-first century for the quality of healthcare in the United States are as follows:

1. The commitment of practice contemplation in agreement with some fundamental trustworthiness. It focuses on if the present issue typifies abominable money related favorable position to an individual. Besides, it dismembers if the matter depicts abusing the prosperity providers.
2. The contemplative commitment of practice, such that encapsulates reasonable exercises to the best-preferred standpoint of the individual and the prosperity office. The establishment looks at whether the exercises of the prosperity providers work to the most major benefit of the prosperity association or something different (Ogrinc et al., 2015).
3. The commitment of practice of contemplation with the dimension of thought a standard sensible individual would in near conditions. It depicts the centrality of due steadiness for restorative administrations providers in treating the patients.

**Importance of Healthcare Quality**

1. The centrality of therapeutic services quality for the alliance is the essential prerequisite for the patients thought to enhance the diminished method for consideration to patients. The coalition has watchful about the best treatment working environments to fulfill our every single patient on the best fix to get their thriving in the long run (Mohammed et al., 2016). As of now, the situation of the enormity of social insurance nature of the association depends upon its incredible association structure to concentrate on all aspects of the competent organization's requirement for changes to update diminished therapeutic services quality at whatever point.

2. The alliance has begun towards quality activities through the choice of wellbeing care agents and other staff individuals to do each work effectively and adequately for the productivity of the quality social insurance. For instance, the informed and gifted medical attendants would be investigated most by a wide margin of schools and universities that have completed their nursing degree. This activity would expand the best quality social insurance associations. Additionally, the other case to give the significance of therapeutic services quality is the execution of cutting edge medicare advancement set up of the customary contraption. It would update the method for thought with noteworthy suitability by diminishing time in a first circumstance and operational framework.

3. The reputation of an organization is as vital as its revenue. Consequently, the enhancement of quality in healthcare will bring good name to the hospital and will be useful for its ranking (Mohammed et al., 2016). The medics and nurses are obliged to provide a hospitable environment along with the increased facilities in healthcare services. The proper name and word of mouth are important to build the reputation of an organization and professional. Therefore when a patient is treated well and with care, it will take the organization to heights through the feedback and word-spreading of the patient.

**Plan to Protect Patient Information**

The privacy and confidentiality of patients are essential to both, the patient and healthcare provider. The Health Insurance Portability and Accountability Act (HIPAA) is an act which ensures the privacy and safety of the patient’s information. Following are the steps which incorporate the action plan for the protection of patient’s information in hospitals

1. Data security is a critical component when it comes to the privacy of the patient. The patient trusts the hospital system with his information, so it is therefore obliged on the hospital administration to protect that information from everyone who is accessible to that data, including the IT guy. Different profiles could be created by the administrators, adding the devices of all lab assistants to the whitelist so that they open up the required data of the patient.
2. Encouraging security-culture in the whole organization by implementing the protected health information strategy devised by HIPAA. The culture can be incorporated into practice by awareness among the healthcare providers of all levels about ethics and moral principles. However, if someone breaches the rule and regulation of patient confidentiality, they should be penalized according to the healthcare laws.
3. Easy-access of the patient should be provided to their own records or data sets. As the record is most safe with the patient himself, so they should not be denied the access as it is against the law. The data should be stored into one database so that it is remotely accessed by all the parties specifically involved, i.e., the patient, doctor and medical facilitator related to the treatment.
4. It is turning the access into advantages of the patient after building the authorized policies and profiles related to the patient. This way a competitive advantage is given to the organization as a patient will be reliant on the hospital for getting access to his medical history and treatment purposes. The last step involves the intrusion of the patient into all the records and data sets through the hospital's database. Legal compliance gets easier when remote access is provided to all the parties. It further makes the process smoother and resulting in patient retention and quality care of the patient in the hospitals.

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