

Quality Management Systems In Specific Services In Slovak Republic

Jarmila Šalgovičová, PhD

*Slovak University of
Technology in Bratislava,
Faculty of Materials Science
and Technology*

Abstract: *The paper analyses the approaches to implementation and improvement of services quality in the area of human medicine in Slovak health-service institutions.*

Keywords: *Total quality management, Models of quality management system applicable in health-care, Improvement of the population's health state, Health-care system, Indicators of quality*

1. INTRODUCTION

Present economic policy in Slovakia prioritises basic objectives in the area of health care – to improve population's health state, to increase readiness of health-care system to meet the inhabitants' needs and to provide financial protection of individuals from emergency costs for health-care. These factors stimulate the implementation of quality management into health-care. National policy of quality support recommends using various models, including EFQM Model of Excellence, Quality Award of the Slovak Republic and implementation of a quality management system according to ISO/IWA 1:2001 international standards, the regulations for the process of improving the services in health-service organisations. The aim of implementation of quality management principles into the practice of health-service organisations is clients' satisfaction and life quality at optimum costs.

2. ESSENCE AND MEANING OF QUALITY IN HEALTH SERVICE

Quality of health involves, according to World Health Organization, overall complex of human characteristics covering all its dimensions: physical, mental, social, emotional and spiritual (connected and relating to each other, through which man can

get ability to meet determined or expected needs to accomplish mission in particular period of life in accordance with model of self-determination and in accordance with compass of quality of life.

To enlighten essence and meaning of quality of health and quality of health service, we can use definition of quality as explained in complex of ISO international standards. Pursuant to STN EN ISO 9000 standard: 2001 the **quality is measure, the complex of own characteristics meets requirements with**. It is an ability of product, system or process own characteristics to meet requirements of customers and other interested parties.

Health staff often understands the **quality of health service** as a summary of results achieved in prevention, diagnosis and treatment, defined through needs of population on the basis of medical science and praxis. However, important is to highlight continuity under the concept of quality, which involves permanent ability of health service provider to meet expectation, needs and requirements of patients, which can be assessed considering:

- availability,
- effectiveness in connection with individual requirements of patients,
- equality in providing healthcare,
- effectiveness and economy,
- social acceptability,
- time spent waiting in waiting-rooms,
- assessment of patient's information concerning empathy of health staff, etc.

From patient's point of view also psychological, ethic, organizational and economic aspect is taken into account, apart from quality diagnosis or healthcare. Perception of patients can be influenced also, for example, by health staff's approach, environment or atmosphere in a particular institution, on how patient is informed of his/her illness, diagnosis, problem, etc. Also other participants' point of view taking part in provision of healthcare is important.

3. APPROACHES TO QUALITY IN HEALTH SERVICE

Patients and healthcare payers in all developed countries expect, that quality healthcare will be provided for fair price under these conditions. They expect healthcare providers to be able to produce evidence on quality of the provided healthcare. Therefore, use of system models of continuous quality growth and effectiveness of provided healthcare is accented for health organizations activities.

Present approach to quality in health sector is characterized by focus on keeping exact practices in medical and non-medical field. Although many variants of healthcare quality attributes, as well as list of the requirements could be prepared, practical experience from other branches shows that this is not efficient. More sensible and universal way is to use methods of tested quality management system, to implement system according to requirements and to leave concretization, in accordance with local conditions, up to each particular organization.

Required system provision of quality can be realized in various ways. There are several successful quality management systems (QMS) worldwide.

Among the most widespread systems these are QMS pursuant to STN EN ISO 9001:2001 standard, also American model of Malcolm Baldrige or model of exceptionality by the European Foundation for the Quality Management are important. Considering methodical preparedness and popularity, the most appropriate system under Slovak conditions is QMS pursuant to STN EN ISO

9001:2001 standard, namely its adapted version for health service – IWA 1 Quality management system - Guide for improving processes in health services organizations. Since 2007, also Slovak technical specifications of STN CEN/TS 15224:2007 Health services - Quality management systems - Guide for use of EN ISO 9001:2000 and STN CEN/TR 15592 Health services - Quality management systems - Guide for use of ISO 9004:2000 in improving health services.

Also model of international principles for creation of national accreditation standards of accreditation agenda ALPHA, which is part of the International Society for Quality in Healthcare (ISQua) and model of accreditation standards of international section (JCIA) of Joint Commission on Accreditation of Healthcare Organizations (JCAHO - This non-profit organization constantly tries to elaborate complex of criteria for evaluation of level and quality of provided healthcare, it monitors level and quality of health service since 1951. Hospitals are assessed according to 500 indicators and assessing takes four days, whereby the commission has access to documentation, communicates with staff and patients. It focuses on patient's rights, ethics, education of patient and family, monitors infections, doctors and nurses, management of hospital, distribution of information.) belong among other known international system models implemented in organization providing health services.

4. PURPOSE OF QUALITY MANAGEMENT SYSTEMS IN ORGANIZATION PROVIDING HEALTH SERVICES

Purpose of quality management system (QMS) implementation in healthcare organizations is achieving conformity in providing quality, within the organization's activities, with requirements of patients and other interested parties. As apparent from picture 2.1, showing particular components of patients care in healthcare organization, QMS implementation in healthcare institution must be performed with maximum effort to achieve:

- increasing patients' satisfaction,
- satisfying needs and expectations of patients,
- ensuring quality and continuity of all activities,
- introducing better transparency and effectiveness into operational activities in healthcare institution,
- effective using of financial and human resources,
- showing capability to fulfil patients' requirements,
- internal and external evaluation of this capability.

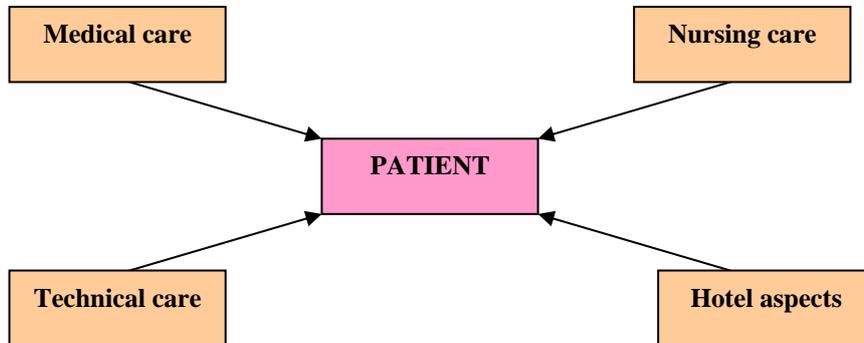


Figure 1. Particular components of patients' care in healthcare organization

Quality medical care must:

- lead to optimal improving of patient's health,
- emphasise improvement of health and prevention of illnesses,
- be carried out in time,
- strive for informed cooperation and participation of patient within the process of medical care,
- be based on accepted principles of medical science and professional use of correct technology and professional means,
- be ensured with sensibility and interest in patient's welfare,
- be sufficiently described in medical documentation, so as to enable continuity in care.

STN CEN/TS 15224 Health services - Quality management systems - Guide for use of EN ISO 9001:2000 introduces characteristics of health services quality as distinguishing characteristics, which include several aspects, such as:

- adequacy;
- security;
- effectiveness and power;

- care, respect and privacy;
- continuity of care;
- perceptivity of patient and customer;
- availability and accessibility.

5. LEGISLATIVE REQUIREMENTS FOR QUALITY IN HEALTH SERVICE IN SLOVAK REPUBLIC

Pursuant to Act no. 653/2007 Coll. amending Act no. 578/2004 Coll. on Healthcare Providers, Healthcare Workers and Professional Healthcare Organisations as amended, the provider is obliged to continuously provide quality system to keep an increase quality so as to be relating to all activities, which can influence health of person or process of his/her treatment. Healthcare institution's personnel and material supply must comply with specified requirements.

The act defines quality management system as written documented system for providers, the basic aim of which is limitation of shortages in providing healthcare in concurrent increasing of satisfaction of persons to which the healthcare is provided and in

keeping provider's economic efficiency. Details in provision of quality system are established by generally binding legal regulation to be issued by the Ministry of Health.

Evaluation of quality system is performed by authorized persons pursuant to special provision (Act no. 264/1999 Coll. on technical requirements for products and on conformity assessment as amended by later regulations).

In connection with QMS certification, which is final step in its implementation and confirmation that the system is working and meets requirements, various misunderstandings incur. It needs to point out, that QMS certification requirement must not result from the law, since it could be considered as obstacle in business. Therefore this requirement is not shown in any European directives, neither in any international conventions on mutual recognition nor is it shown in Act no. 264/1999 Coll. on technical requirements for products and on conformity assessment (in terms of which the quality systems should be assessed). It is not even included in respective consequential or national documents, where even QMS implementation (not certification) is considered as variant solution for proving conformity (reliability).

So, how to prove, that workplace continuously ensures QMS? Certain guidelines are stated by requirement for quality system to relate to all activities, which can influence health of person or process of his/her treatment. This means, not all activities, but only those directly or indirectly relating to the patient. In such case QMS conformity with standard cannot be declared, cannot be certified, but only registered. Virtually, this means, that QMS auditor will verify and assess its contents and level of standard's

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requirements implementation, and in case the auditor should conclude, that implemented QMS sufficiently guarantees quality of activities influencing health of person or process of his/her treatment, QMS will be registered and the concerning certificate will be issued. Certain liberty for implementation of obligatory QMS certification would allow process of issuing licences, if the Health chamber includes it in conditions for issuing licences for provision of healthcare services.

6. CONCLUSION

To provide and improve quality in the above-mentioned area, it is necessary to prepare a notions pool for relevant subjects with the aim to increase knowledge, skills and ability to implement rules and principles, methods, tools and techniques increasing the quality of provided health services.

The set of recommendations will enable to design, implement and manage the efficient quality management systems in non-governmental health-service institutions. National policy of quality support recommends to use various models, including EFQM Model of Excellence, Quality Award of the Slovak Republic and building the quality management system according to ISO/IWA 1:2001 international standards, the regulations for the process of improving the services in health-service organisations. The aim of implementation of quality management principles into the practice of non-governmental health-service organisations is clients' satisfaction and life quality at optimum costs.

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