

"Exploring Healthcare Quality: Patient-Centered Care, Patient Satisfaction, and Strategies for Enhanced Patient Care"-A Review

Dr.abdul azeez ¹MD dip in hospital management

¹ clinical operations manager
Vijaya institute of Trauma and orthopaedic,tamilnadu,india

ABSTRACT

Objective: This structured abstract offers a concise overview of critical healthcare concepts: healthcare quality, patient-centered care, and patient satisfaction.

Healthcare Quality: Healthcare quality involves delivering preventive, rehabilitative, acute, and chronic care effectively and efficiently. Key components include dependability, confidence, and reactivity. The Institute of Medicine identifies seven pillars for high-quality healthcare, emphasizing patient-centered, safe, efficient, effective, and impartial care. Quality assurance programs are crucial in preventing medical errors and hospital-acquired infections.

Patient-Centered Care: Patient-centered care addresses disparities faced by marginalized populations, promoting collaboration among patients, healthcare providers, and stakeholders. This approach emphasizes shared decision-making and patient engagement. It is endorsed in many countries and by global organizations like the OECD and WHO.

Patient Satisfaction: Patient satisfaction depends on healthcare experiences aligning with patient expectations. It involves cognitive assessment and emotional responses. Different models describe satisfaction as a dynamic, perception-based process influenced by individual values and past healthcare experiences. High patient satisfaction is a key quality care indicator.

Enhancing Patient Care: Enhancing patient care is a top healthcare priority, driven by increased public awareness, competition, and regulatory requirements. Quality assurance programs and models, employee training, accreditation, and community engagement play pivotal roles in improving healthcare quality.

Conclusion: Healthcare quality is crucial, demanding clear definitions, systematic approaches, and strong leadership. Patient-centered care and patient satisfaction are integral components of quality healthcare delivery, impacting patient experiences and outcomes. These concepts are central in the ongoing mission to provide optimal healthcare.

Keyword : *Healthcare quality, patient-centered care, patient satisfaction, quality assurance, healthcare disparities, shared decision-making, patient engagement, healthcare experiences, quality care indicators, healthcare improvement.*

1.INTRODUCTION

The ability of care components, such as structures and processes, to accomplish objectives, such improved outcomes, is referred to as quality. The mentioned or inferred reason for visiting a doctor (or relationship with a reputable medical professional patient) moulds the features or measurements that will be employed to assess the calibre of the encounter or connection to a significant degree. Care quality is among the most commonly topics that

are discussed in health policy and care. Currently, policymakers' top priorities at levels both domestically and globally [1-6]. Health objectives differ based on whether they originate from patients, governments, and administrators of clinics or other establishments or organisations, medical experts or other participants in the health system, like a third-party insurance provider. The quality of work is rising globally. focus within the framework of the Sustainable Sustainable Development Goals (SDGs), as the Development Goals (SDGs) comprise the following: in order to "achieve universal health, incorporating defence against monetary threats, availability of vital, high-quality medical care. and secure entry access inexpensive, high-quality, and vital medications and immunisations for everyone [7]. There are numerous ways to define quality of treatment, however One suggestion made by the Institute of Medicine (IOM) is a description that sums up the qualities of numerous others and is regarded as commonplace "the degree to which health services are provided to people and groups that raise the possibility of intended health effects and align with current expertise in the field. Interactional Excellence is defined as care that satisfies the intellectual, psychological, and bodily requirements of a patient in a way that is appropriate for their inclinations and anticipations. A different word for "Patient-centered care" describes this kind of treatment. A The most crucial component of interpersonal care is the patient involvement in the decision-making process method [8]. Terms that are unique to each person used in definitions of patient, client, consumer, senior, and quality and Medicare participants or beneficiaries. "Client" is, without a doubt, the word most commonly used to receivers in the definitions we provide examined. Individuals in need of medical care anticipate individualised, superior treatment, which is also the main objective of carers. Patient opinions about the quality of their own care are significant because they can reveal patient views of hospital norms⁶, in addition to elucidate patients' definitions of quality [9]. Patients are the only source of as receivers of details regarding whether they are receiving treatment with honour and decency. Their backgrounds may generate significant concepts regarding the kinds of adjustments required to close the gap between the treatment given and the appropriate service offered. Quality is perceived by patients depending on the availability and cost of healthcare, quick delivery, prompt diagnosis and care, making a prompt return and treatment possible. therapy. treated with consideration, dignity, and worry [10].

Personalised, superior treatment is another of the main objectives of healthcare providers. Patient perceptions of care quality are significant because they can provide insight into how patients define quality and can also reflect their opinions of hospital standards. Modelling the quality of care theoretically: The theoretical underpinning of this study was quality of care from a patient perspective (QPP), which examines quality of treatment from the patient's point of view. According to the RRQ approach, the patient's perception of the quality of their healthcare is measured in relation to their perceived reality (PR). Patients' ideas of what makes for high-quality care are influenced by their own standards, expectations, and experiences as well as by their interactions with the current healthcare system [11].

The quality of care literature in health systems was vast and challenging to systematise, according to a prior study on the subject conducted by the European Health Systems and Policy Observatory 10 years ago. This is still the case today. Reference [12]. Research is offered employing a range of techniques or approaches to guarantee or enhance the quality of treatment, frequently concentrating on certain institutions (hospitals, clinics, medical centres) or specialisations (emergency care, maternity care, etc.). [13].

This data has improved our knowledge of the efficacy of particular therapies for particular patient populations in particular situations. The literature that is now accessible, however, hardly discusses the subject of whether technique is better than another and frequently does not advise policymakers on which approach to use in a particular situation.

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2.healthcare quality

Healthcare quality is a multifaceted concept, encompassing a wide range of services, including preventive, rehabilitative, acute, and chronic care, as well as restorative treatment. These services are delivered in various settings by a diverse group of medical professionals. The importance of healthcare quality is particularly pronounced for senior citizens, who often require services from multiple sources. Ensuring continuity and coordination of care is essential in this context [14].

To understand the quality of healthcare, three primary features come into play: dependability, confidence, and reactivity. These qualities are essential for healthcare systems to be valid, efficient, and optimal. Furthermore, the seven quality pillars introduced by Donabedian include cost, reasonableness, legitimacy, and acceptance. The Institute of Medicine asserts that high-quality healthcare is prompt, patient-centered, safe, efficient, effective, and impartial [15].

The pursuit of high-quality healthcare has evolved within the healthcare team and between disciplinary perspectives. Florence Nightingale, one of the pioneers in creating a theoretical framework for quality improvement in nursing, discussed the compromises in nursing health and quality by recognizing and attempting to eliminate obstacles in the healthcare system [16].

The United States' Institute of Medicine (IOM) defines quality of care as the extent to which customized healthcare aligns with intended health effects and is in line with the current knowledge. The IOM's definition of "health outcomes" may appear more limited compared to Donabedian's notion of "health of the patient." However, the IOM emphasizes that these "desired" health outcomes should reflect patient satisfaction, overall well-being, and life quality in addition to general health indicators [17].

Inspired by the IOM's definition, various other organizations globally have their own interpretations of healthcare excellence. Health services encompass a wide variety of care, including acute, chronic, preventive, healing, and rehabilitative care provided by diverse healthcare providers in various contexts. These definitions reinforce the connection between quality, health promotion, and prevention, emphasizing the dynamic and ever-changing nature of quality in healthcare [18].

A significant study released in 2001, known as "Crossing the Quality Chasm" by the Institute of Medicine (IOM), established six objectives for an excellent health system that keeps patients safe: (a) safe; (b) equitable; (c) grounded in evidence; (d) patient-centered; (e) efficient; and (f) timely. These elements directly impact patient satisfaction and well-being [19].

To the average person, quality may vary depending on expectations. It could be a service, such as canteen provision, or a product. One's assessment of a product or service depends on their expectations and what is expected of it [20]. In the context of healthcare, the quest for high-quality care remains an ongoing and evolving endeavor that seeks to provide the best possible outcomes for patients.

3. patient centered care:

Caring for the patient, particularly in a patient-centered approach, is of utmost importance for marginalized or vulnerable groups. This includes individuals such as the young, elderly, disabled, mentally ill, those from diverse linguistic and cultural backgrounds, and those residing in isolated or rural areas. Additionally, it encompasses Indigenous peoples of the Torres Strait population. Many of these individuals may face challenges when interacting and working with healthcare professionals, making it crucial to involve family, friends, caregivers, spiritual and pastoral counselors, and the general public in the care process [21].

Patient-centered care is seen as an opportunity to address the disparities that these populations might encounter. It aims to promote greater involvement from everyone involved in healthcare procedures and potentially improve health outcomes. Patient-centered care encompasses a wide range of ideas and theories on how patients and customers engage with the healthcare system and the delivery of healthcare. It revolves around collaboration between both the patient and the healthcare provider during care delivery, emphasizing partnerships between patients, their families, and caregivers. This approach extends to residents' involvement in the planning and policy development of healthcare services and healthcare services governance [21].

While there is a wealth of research on various specific elements of patient care, such as doctor-patient communication during consumer consultations or participatory techniques in the preparation of medical services, this article provides an overview of the tactics and methods that healthcare services can use to ensure patient-centered care is accessible. These strategies aim to foster patient engagement and enhance the quality of healthcare services delivered.

Patient-centered care is broadly recognized by numerous authorities and institutions as a crucial component of healthcare quality. Many countries, including those in the Organisation for Economic Co-operation and

Development (OECD), such as the United States, Australia, Ghana, and the United Kingdom, have incorporated patient-centered care into their national frameworks and documents. Organizations like the OECD and the World Health Organization (WHO) have embraced patient-centered care as an integral aspect of medical treatment, reinforcing its importance on a global scale [22].

4.satisfaction of patients

Patient satisfaction is a crucial aspect of assessing the quality of healthcare from the patient's perspective. It is defined as the combination of traits and features of a health-related product or service that affect its ability to meet the stated needs and expectations of the patient [23].

To measure patient satisfaction, Pascoe describes it as an outcome derived from comparing essential aspects of an individual's healthcare experience with a subjective benchmark. This comparison process involves two connected psychological processes: cognitive assessment, involving ranking and evaluation, and practical reaction, involving emotional responses to the framework, procedures, and outcomes of medical services. Subjective standards for evaluating healthcare experiences can include ideal conditions, subjective judgments of value, comparisons to past experiences in similar circumstances, or a combination of these factors.

Patient satisfaction is influenced by the extent to which expectations are met. When healthcare experiences exceed or fall short of expectations, satisfaction levels are affected. The magnitude and direction of the gap between perceived and expected services vary based on customer expectations, management's perception of these expectations, the quality of service, real-time service delivery, and communication with external services [24–25].

A more recent perspective on patient satisfaction, as observed by Strasser and Davies, views it as a direct result of real-life situations. Patient satisfaction is defined as the patient's evaluation of their value and subsequent reactions to perceived cues just before, during, and after exposure to medical services. This model expands on the concept, stating that patient satisfaction is a cognitive and perception-based process in terms of attitude formation. It is a complex and multifaceted structure, a single global structure, a dynamic process across multiple dimensions including time, self-perceived equity and suffering, and a longitudinal response pattern described as cognitive, behavioral, affective, or none of these. It is an iterative process for shaping attitudes and subsequent behavioral reactions, personalized based on the patient's values, perceptions, expectations, and past healthcare experiences, as well as specific societal factors, including their current health status [26].

5.enhanced patient care:

Enhancing patient care has become a top priority for all healthcare professionals, with the ultimate goal of achieving a high level of patient satisfaction. Several factors contribute to this focus, including increased public awareness and demand for improved care, heightened competition, stricter healthcare regulations, a rise in medical malpractice claims, and concerns about subpar performance [27].

The quality of patient care is primarily dependent on the quality of the healthcare infrastructure, the level of education, employee competence, and the efficiency of the operating system. Embracing a patient-centered framework is fundamental to addressing the challenges faced by the healthcare industry, encompassing both non-medical and medical aspects. Developing nations face even greater challenges due to the cost and quality disparities, requiring equal efforts to enhance patient care opportunities [27].

Healthcare quality management has shifted from anticipating errors and mistakes to envisioning the possibility of a flawless patient experience. Charles Crosby emphasizes a preventive rather than evaluative approach to quality assurance. Research indicates that a significant proportion of hospital-related patient fatalities result from medical errors and hospital-acquired infections, both of which are preventable through quality assurance programs [27].

While system design is crucial, it is not sufficient for effective healthcare administration. Excellent clinical care results from the most efficient allocation of resources to deliver top-notch medical treatment. The Five Sigma design aims to produce nearly perfect output, although no model has been proven to be superior in terms of quality control. The key to success is the commitment of management and the healthcare team to quality [1].

The primary objective of any healthcare process should be to ensure patient satisfaction. A quality assurance program should encompass adherence to patient-centered care, efficient guidelines, and best practices. According to the Institute of Medicine, patient-centered care honors and embodies the desires, needs, and values of each patient, ensuring that the patient's principles guide every clinical decision. Collaborative decision-making between physicians and patients is another strategy, allowing patients to determine the best course of action based on available evidence [1].

Patient satisfaction, a multifaceted and highly individualized concept, lacks a precise and consistent definition. Most studies examining the complex relationship between the three main components of service quality have been conducted within the context of developed nations, which may not fully extend to evolving nations due to cultural differences. Overall, the quality of services provided is one of the primary factors patients consider when selecting a healthcare provider [2].

Various tools are useful for ongoing quality improvement within the healthcare system. These include assessments of internal quality, public feedback, as well as corrective and preventive actions to meet relevant requirements. ITI Medical Integration of Management Information Systems & Leadership is dedicated to assisting with the application of quality models. The Plan-Do-Check-Act (PDCA) cycle is one of the most commonly used tools for continuous quality improvement (CQI). Additional techniques include Six Sigma, Lean, and Total Quality Management (TQM). The Kano model is also employed to assess quality and prioritize improvement efforts [27].

In order to determine the needs of patients and enhance their satisfaction with medical care, it is essential to implement clearly specified procedures that adhere to accepted operational guidelines. Ongoing training and education for healthcare employees are crucial components of internal quality control measures. Accreditation, which involves third-party evaluation of both the quantity and quality of healthcare services, also plays a significant role in ensuring patient satisfaction [1].

CONCLUSION:

In conclusion, gaining a deeper understanding of healthcare quality is the essential first step in promoting high-quality healthcare research and initiatives. Clarity in the definition of quality is vital to avoid intermittent or ineffective improvement efforts. Responsible authorities should consider shaping coursework to educate future professionals on how to improve patient satisfaction. Elevating the standard of healthcare services requires strong national government leadership, focused local support, and initiatives at the facility level. Engagement with and support for the communities served by the healthcare sector is essential. The process of enhancing the quality of healthcare services should be systematic, well-documented, and shared both within and among nations [1].

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