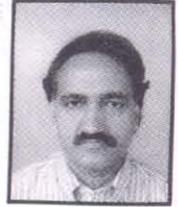




## Total Quality Management and Accreditation : Strategic Essentials for the next Millennium



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### Introduction

The last decade has witnessed a revolutionary array in health care dimensions. Terms like 'Total Quality Management', 'ISO-9000', 'Continuous Quality Management', 'Reengineering', 'Benchmarking' and 'Accreditation' have embraced and got incorporated in the delivery of health care services. Globalisation, economic liberalisation, privatisation of health services, patients enhanced awareness and expectations from providers of health care have made 'Quality' an inseparable part of the health care delivery system.

To achieve quality is thus an essential ingredient and to formulate, evaluate standards as per predetermined objectives is a requisite which has become universally applicable to all health care institutions.

Total Quality Management (TQM) and Accreditation are two main strategic essentials which have to be initiated, evolved and sustained in all health care institutions. These are imperative managerial tools for successful functioning of a complex, matrix and a multi-disciplinary institution *i. e.* the modern hospital.

### What is TQM ?

The word most central to the acronym is quality and is formally defined as '*the totality of features and*

*characteristics of a product or service that bear on its ability to satisfy stated or implied needs*'. Simply stated Quality is conformance to specifications. Donabedian has defined quality as applicable to health care as : (1) "*That kind of care which is expected to maximise an inclusive measure of patient welfare after one has taken account of the balance of expected gains and losses that attend the process of care in all its parts*".

Quality is not the end, it is a means to an end. Quality is not an absolute standard but must be worked at and consciously achieved. Quality in health care institutions is different from other organisations since the product *i. e.* health care is multifaceted and multidimensional product and is delivered personally to the customer. Interaction between the provider and consumer significantly affects perception of quality.

**Quality Control** comprises the qualitative or quantitative measurements or tests of performance and the determination of adequacy and acceptability of performance.

**Quality Assurance** is the application of a series of quality control steps at multiple stages of a procedure to

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verify that all aspects of the procedure are of acceptable quality.

*TQM involves a systematic managerial approach in an organisation based on continuous improvement of all operations, processes and functions. It is used interchangeably with Continuous Quality Improvement in many areas. It is achieved by understanding, meeting and exceeding the needs of the customer.*

TQM begins with a simple idea and an assumption that everything can be continuously improved.

TQM is a philosophy as well as a set of guiding principles and practices that represent the foundations of a continuously improving organisation. It integrates fundamental management techniques, existing improvement efforts, futuristic quality plans, innovations and their successful implementation (2).

In TQM every one strives to get things right the first time, everytime. The main objectives of TQM are :

- (a) Customer Focus
- (b) Scientific approach
- (c) Continuous improvement
- (d) Participation by everyone at all levels.

### What is Accreditation ?

*Hospital accreditation is a process whereby a hospital is objectively judged against an accepted level of performance and is evaluated to determine the appropriateness of organisational structure, facilities and outcome. In the process, the facility is informed of weaknesses in its operations and given advice on how to correct the detected problems (3).*

In health services accreditation encourages professional participation from within the institution but is subject to external and objective control.

### Need for Accreditation

In the management of any type of system, success can most readily be attained if appropriate goals are first established. The development of appropriate hospital standards provides these goals. Hospital administrators may then focus on attaining levels of care, that although challenging are achievable. With the availability of standards, managers are less likely to become solely occupied by day-to-day problems and more likely to place some effort in a proactive search for institutional improvement.

A successful accreditation programme is educational in nature rather than punitive. The standards that are developed should facilitate improvement in quality of care, must be realistic and achievable within the available resources (4).

The standards used in accreditation programmes previously focussed on structural evaluation but now attention is being given also to outcome evaluation. Accreditation programmes are operated to ensure that good quality services are provided by health institutions, their evaluation standards contain all the components of quality care. Modern accreditation programmes contain all aspects of the three components of quality care (5).

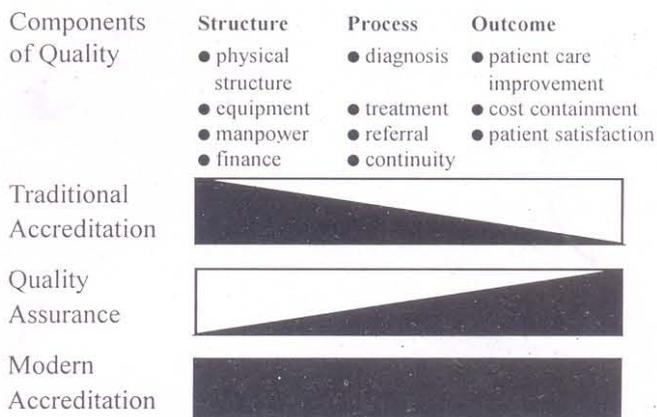


Fig 1 : Contents of Accreditation shown diagrammatically.



**Accreditation and TQM : A means end relationship**

Accreditation is at times viewed just as a variant of audit procedure. However, accreditation in philosophy and practice ensures that quality care is a priority in the organisation.

By continually updating standards the accreditation programme has a positive effect on the quality of patient care. Accreditation programmes highlight inefficiency if any, in a health care institution and this aids in optimal utilisation of resource.

*Quality Assurance is now a precondition for accreditation by the accrediting agency in the United States of America.* JCAHO (Joint Commission on the Accreditation of Health Care Organisation). Before the implementation of the Quality Assurance Standard, auditing method was utilised by JCAHO for accreditation. However the results of the audits were not translated into any specific programmes, as many times merely a “numbers game” was being performed in which the emphasis was on quantity and not quality. JCAHO has now given an agenda for change under which all health care organisations are expected to adopt - CQI/TQM methodology, assessing user needs ; assessing, improving and monitoring key processes within the organisation and educating all personnel in the techniques of TQM.

While accreditation programmes are not a quality assurance panacea, it is an essential requisite for more sophisticated quality assurance programmes, and a means to achieve TQM in health care institutions (6).

**Are TQM and Accreditation old wines in new bottles ?**

*Some health administrators and clinicians view TQM and Accreditation as just buzzwords. Medical audits, review committees have existed for long, so what is the necessity of TQM and Accreditation ?*

A modern hospital is a matrix organisation, an amalgam of human resources, architecture wonders and technological advancement. Traditional Quality Assurance efforts are focussed on retrospective review of documented patient care mainly in the form of conventional medical audits. Outcome in the form of patient review are not included in these audits. TQM focuses on all the facets of effectiveness and efficiency in an organisation. In traditional Quality Assurance, effort is to achieve local or national standards, however in TQM attempts are also made to improve upon these standards e. g. turnaround time in a particular hospital’s Emergency Department from patient arrival to disposal is 20 minutes. A preliminary analysis of the process may reveal major issues affecting the through put time e. g. a delay in the registration of the patient. By resolving this turnaround time may be decreased to 18 minutes. Traditional Quality Assurance terminates here. However TQM process will dwell further and it may reveal inadequate nurse staffing as one more component for the delay. Hence a further reduction in the turnaround time may be achieved.

*Another important consideration in TQM is the patients input.* If the patients perceive that they are being rushed through the system, the improvement in through put time may hamper in patient’s satisfaction. *Quality is not a number rather a function of positive perceptions.*

The main differences between traditional Quality Assurance and TQM are enumerated in Table 1.

Traditional QA	TQM
1. Caregiver primary object of review	Systems of patients care focus of review
2. Focus primarily on clinical issues	Examines all services clinical, non-clinical
3. Content when the care delivered meets local, national or international standards.	Attempts to improve services/ processes even if level of care within existing standards

**Table 1 : Comparison between Quality Assurance and TQM**

**Are Accreditation and TQM feasible in India ?**

*Globalisation, increased patients awareness, patients expectation, cost reduction, emergence of corporate hospitals have necessitated that the health care institutions incorporate quality as an essential component of health area provisioning.* The concept of the patient as a passive recipient of the health care provider's beneficence has changed rapidly.

Although successful accreditation programmes have completely been established in only four countries viz. USA, Canada, Australia and New Zealand, recent experiences have suggested that hospital standards can be successfully implemented in developing countries e. g. **Egypt** (7). **Pakistan** has also embarked upon establishing a system of hospital standards and accreditation with the technical aid of Abt Associates Inc. and funded by the US Agency for International Development (USAID) (8).

Health care institutions due to the following recent events are more amenable to quality ratings and achievements.

- (a) Applicability of Consumer Protection Act to health care institutions.
- (b) Proposed entry of private insurance in the country including the health care sector.
- (c) Enhanced quality consciousness amongst staff and patients.

Quality control and Quality assurance activities already exist in a number of health care institutions in the form of Medical Audit Review and Evaluation Committees Bureau of Indian Standards has already issued a number of standards applicable to hospitals. The ISO-9000 series as applicable to Indian service organisations including hospitals has been published

under the title "Quality Management and Quality System Elements - Guidelines for services" (9). Some of the organisations including the Apollo Hospital, Chennai has already acquired ISO certification. Thus TQM and Accreditation are applicable and feasible in India.

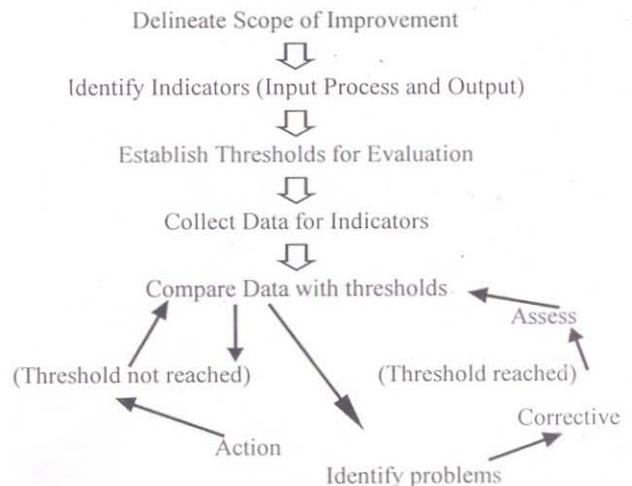
**Implementation strategies**

*Quality is never an accident. It is always the result of good intentions, sincere efforts, intelligent direction and skillful execution. TQM is the application of quantitative method and human resources to improve the material and services supplied to an organisation, all the processes within an organisation and the degree to which the needs of the customer are met now and in the future.*

Strategy is a unified, comprehensive and integrated plan designed to assure that the basic objectives of the enterprise are achieved. The following are some salient features which must be considered while implementing strategies for TQM.

**1. Model of quality improvement**

The Quality Assurance model as advocated by JCAHO is depicted in Fig 2. For the monitoring and evaluation process the model must be adopted (19).



**Fig. 2 : JCAHO QA Model**

## 2. Elements of quality

The important elements of quality are :

- (a) Clinical quality
- (b) Service quality
- (c) Cost efficiency
- (d) Continuity of care.

The focus of all the above activities is the patients.

The basic tenets of TQM are :

- (a) Quality is customer driven.
- (b) Quality improvement efforts focus on preventing problems.
- (c) TQM focuses on process optimization.
- (d) TQM is a never ending process of continuous improvement.

## 3. TQM must be multifaceted and multi dimensioned

Various dimensions must be considered and evaluated.

The important variables are listed in Fig. 3.

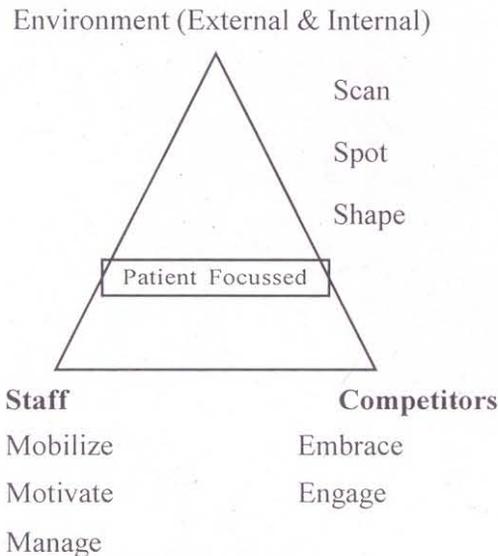


Fig 3 : Facets of TQM implementation

## 4. Leadership

To attain TQM, it is imperative that the leader has vision and creativity. An effective and efficient *leader facilitates rather than control, simplifies rather than complicate, accelerates rather than govern* (11).

The National University of Singapore, Graduate School of Business has given an animalistic illustration of leadership. The same is depicted in Fig 4.

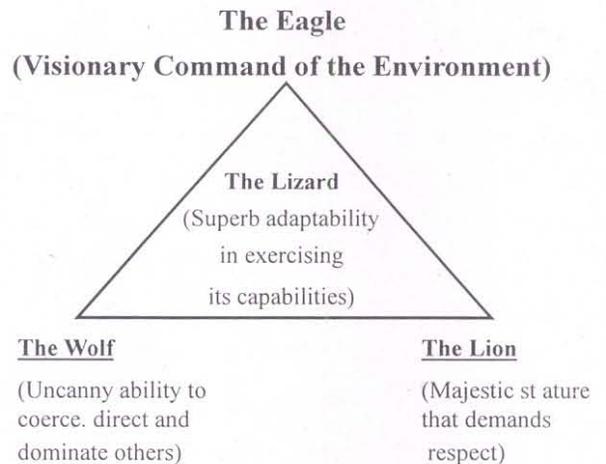


Fig. 4 : Animalistic illustration of leadership

## 5. Modified shewhart/Deming approach

This is a sequential approach to attain TQM. It is also known as the **FOCUS : PDCA** approach (12). It consists of the following steps.

- F Find a process to improve
- O Organize a team that knows the process
- C Clarify current knowledge
- U Understand causes of process variation.
- S Select the process improvement
- P Plan the improvement
- D Do what you planned, collect relevant data
- C Check to see if improvement is successful. Aggregate and analyse data
- A Act to maintain and continue the improvement.



## 6. Proactive

In TQM quality is more than absence of adverse events. In health care setting, quality consists of doing those things necessary to meet and exceed the needs and expectations of those we serve and doing those things right everytime.

### Recommended guidelines for establishing Hospital standards and Accreditation

The following are recommended :

1. Establishing National Standards. These should be minimum standards that apply to all hospitals, both government and private. BIS has already issued certain quality guidelines for health care institutions.
2. Establishing a National Council which should be empowered to set standards and provide accreditation.
3. Council to have proportional representation from the Government, the private sector and professional organisations e. g. MCI, IMA, BIS.

Accreditation should be voluntary. Voluntary accreditation based on a system of incentives would have greater chance of success. The ISO-9000 certification is applicable to all service organisations including health care institutions. Specific accreditation standards for all services in hospitals will be a step forward in the new millennium.

### Conclusion

The provision of health care services at the highest possible level of quality should be a common goal of all health care institutions. Health care administrators must look globally. Since quality will be a differentiator in assessment of organisations.

It is essential to recognise that quality is a systematic consistent and balanced gameplan, not just something extraneous in health care. TQM and Accreditation are

not mere buzzwords but are extraordinary management tools for organisation including health care institutions to survive and thrive in an era of globalisation, liberalisation and privatisation. It must however, be realised that technologies, tools and standards are not necessarily transplantable. Some need modifications and then may be adopted, however, some may not be adoptable at all.

Application of TQM and adoption of Accreditation are the right steps, in the right direction while embarking on the arduous road of quality health care provisioning for all in the new millennium.

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