DEMONSTRATED ADVANTAGES OF THE IMPLEMENTATION OF A QUALITY MANAGEMENT SYSTEM IN ROMANIAN HOSPITALS

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Abstract
The quality of health services in the last two decades has been one of the important topics raised in international meetings on the priorities of developing countries. That is also the case of Romania which although has a health care system with certain deficiencies managed to make significant progress in the quality field of services provided to patients. Based on the significant importance of the quality of public health services, this paper aims to highlight the most important benefits obtained further to the implementation of a quality management system focused on the needs of patients in the public hospitals, regarded as the main providers of medical services in the country.

1. Introduction
For the current century, the quality of health services is an important referential for the development of modern medicine.

At international level, the quality of health care has become one of the researchers’ and public health specialists’ concerns, especially after 1990, when there were reformed the health systems in different European countries. During this period it is appreciated that European countries were deficient in terms of quality in the provision of health care.

All the analyses started from the assumption that European health systems were ten years behind the USA systems in terms of the development programs of care, recovery and treatment, but also in terms of quality policies. This premise has been one of the main pillars in reforming health systems in European countries and also, a strong impulse in trying to recover this gap.

Research has shown us that there were complaints among the patients and health care professionals related to increased costs for health care services, in a context that lacks a full coverage of the population with such services.

In addition to these issues, lack of policies and procedures for quality assurance has increased these complaints significantly, especially among patients, who often assess the quality in a subjective way.

Another important factor for the development of this concept was the pace of economic development and, at the same time, the increasing of consumer demands for health services.

At the same time, all these elements and variables influencing the quality of health services emphasized the research development for a correct and complete identification of the quality dimensions in public health, highly sensitive though.

On European level, all the actions related to quality assurance have triggered a lot of elements as well as medical institutions endowed with beds or not, national governs or non-govermentamental structures, in a perfect connection with the international organizations involved in the improvement of the population’s health. A wide range of features such as immateriality, non storability, heterogeneity and above all the impossibility to substitute them characterize the health services as not being superficial ones.

Since we take into account that in our country there is an increasing number of aging people we understand the complex character of the health services and also the importance of monitoring quality on nation level.

In our country, the free choice of the medical services providers together with the free movement of the labor force in this field entail certain risks for society.

The health specialist forecast that the next crisis in Romanian health system will be in the human
resources area. Although, the poor financing has been often approached as it is below the real system demands, the main cause of the health staff’s migration is related to working conditions rather than to the payment.

This phenomenon has a strong impact on the patients themselves, especially on the ones who need emergency medical care.

Therefore, we are entitled to think that the quality improvement, in all respects (products and services for the patients, managerial processes, work conditions, preventive medicine promotions etc.) is going to bring benefits to all the parties involved in providing and consumption of medical services.

2. Methodology of research
As we are interested in the quality management approach in medical units, we have tried to prove that it is highly important for a hospital to implement a quality management system focused on enhancing the efficiency of activities and on meeting the demands of the internal and external beneficiaries.

Hence, in a recent study on the patients’ needs in an important Romanian public hospital, we have tried to show the actual advantages of implementing an efficient quality management system going to promote quality as a fundamental value.

Using a twenty questions complex questionnaire, we consider a sample of 400 persons hospitalized in different sections. We have tried to get certain data about the quality dimensions, in order to point out the imperative to implement a quality management system in all the public hospitals in Romania.

The entire study has certainly been made from the patients’ point of view as they are the main beneficiaries of the health services and the most important quality assessors.

One of the assumptions we started with in achieving this study enabled us to check if the patients hospitalized in an unit with a quality management system implemented and certified are highly satisfied.

Actually, the way the quality dimensions are achieved in a hospital is reflected in the patients’ satisfaction.

3. Literature review
Regarding the evolution of the “quality in the medical field” concept, the specialty literature show us three important periods worth considering to understand the progress accomplished so far:

- the first stage – early 20th century – refers to the way there were applied the great scholars’ and specialists’ ideas of that time (especially the great surgeon Ernest Amory Codman), who started to publish articles and studies about the importance of making the hospitals activities very efficient and of avoiding errors. That was the time when there were set the bases for the first program on specific standards in medical activities.

- the second stage – after 1950s – is represented by Avedis Donabedian’s researches, famous physician and professor - founder of the study of quality in health care and medical outcomes research. His concerns for quality made him “pioneer in the quality of health care”, as he was internationally called. This period is characterized by the emergence of a new method for assessing the quality of health care by the tridimensional model: structure (that means organizational attributes such as physical characteristics, culture, management, resources) - process (diagnosis, treatment, care, medical recovery) - outcome (mortality indicators, quality etc.).

- the third stage - around the 1980s - is represented by Donald Berwick’s researches, a renowned physician of that time. Concerned about health systems management, he tried to make the quality-safety-costs report more efficient, applying evidence-based medicine. Based on the quality dimensions in industrial field, Berwick tried to apply quality control measures in different stages of medical care.

In this way, the international health systems are able to operate by the same rules for quality control applied by WE Deming and JM Juran in industrial sector (Zanfir, 2014).

Of course the idea of "make a better people" or "do no harm" has existed since antiquity (promoted by Hippocrates in 500 BC). But, the evolution of this concept is an outstanding one, in all areas and more, in the medical field. Today, we talk about complex quality management systems with well defined stages that engages functions of planning, organizing, coordinating, motivating staff to achieve the objectives of quality, control, evaluation and continuous quality improvement of health services.

We could say that these emerged a fourth stage in the evolution of quality concept in healthcare, stage of the quality management systems, designed and implemented in accordance with international standards specifications.

In Romania, the continuous improvement of quality of health services is essential. Studies have shown that in terms of health, the population of our country presents some of the less favorable indicators across the European area. If we look back on our healthcare system, we notice that there are a lot of factors that require more efficiency in all public hospitals activities. In recent years, causes such us the mortality increasing, due to chronic disease multiplying, the
growth of elderly population share, multiplying the risk factors for health, increased mortality infantile or standard of living, have made Romania a country where the life expectancy of the population is six years lower than in other EU member countries (Vlădescu and Bușoi, 2011).

At present it is difficult to keep under control the demographic changes or the changes in the society structure, but we can intervene to improve the quality of services provided by the Romanian health system, so as to achieve a health level comparable to the developed countries. The patients, as direct beneficiaries can make pressures that will finally have a beneficial effect on the efficiency of hospital activity.

As we say in a previous article, the Romanian economy still recovering from the economic crisis turbulence. It is difficult to insert additional funding for health system strengthening and increasing accessibility to quality health services, especially in areas run (Zanfir et al., 2013).

In this context, there are dissatisfaction problems related to the time necessary for different types of interventions or the distance to be traveled for specialized care. Solving of this deficiencies is the responsibility of the institutions involved in maintaining the health of the population and requires a fairly long period. However, the changes that support the improvement of services quality must be initiated by hospitals. The management of these institutions must understand that in order to have efficient work it must adjust like any other organization to the internal and external pressures.

Researchers in the quality field demonstrates in each study that “the need of health is infinite”. (Opincaru et al., 2004).

In this context, experts say that in order to obtain higher performances under current conditions, hospital managers must ensure the most effective method of treatment and they must find different ways to ensure efficient use of human and economic resources, resources that our health system is deprived of.

Physicians, extremely important part of the system, state that “hospitals managers have already understood that under current conditions, the adjustment to the requirements of modernization and European integration in healthcare involves change in management practices”. (Ciurea et al., 2007).

Considering the opinion of health professionals and public health specialists but also patients’ expressed needs, as a referential, we believe that the most advantageous method to increase the activities efficiency and also to optimize resource consumption is the implementation of a quality management system in all public hospitals in Romania

3.1. A quality management system implementation - solution for more efficient hospital activity

As we say in other papers (Zanfir, 2014), we think that to achieve a high level of performance in the medical field is elementary that all health care units, especially hospitals, to have implemented a quality management system, in accordance to international standards specifications. Since this is an area with unique features, quality management system should be set up so as to develop new methods of management, more efficient and adapted to the characteristics of medical care.

In most cases, the health services quality is perceived through quality of care that was received by the patient. That is a normal thing considering the fact that the patient is the main evaluator of the service quality. Usually, the patient does not understand the complexity of hospital activities and also, they do not know in detail the management processes, operational procedures or clinical practice rules. Therefore, the tendency is to analyze subjectively, only in terms of certain indicators such as the expectation time, medical and auxiliary staff behavior, the quantity and quality of food, the endowment of the hospital or the amount of information received.

Quality management has an overview and does not refer only to the medical activity, but consider all related activities that contribute to it.

Even if in the medical sector, the services particularities are unique, even here there can be successfully applied the recommendations to international quality standards. ISO 9000 family of standards include specifications that healthcare organizations can use to become more effective. Also, these standards can be an important guide for designing the quality management system in terms of efficiency and effectiveness. It should be noted that, by implementing a quality management system, will bring added extreme value, by hospitals orientations to achieving quality. By the quality policy it produces a high responsibility of the management and whole staff and the quality is perceived as a fundamental value. In this way, it develops a quality culture that all of parties involved will benefit.

Moreover, the implementation of a quality management system "make orderliness" in the hospital and helps to create logical stages of the activities, after work procedures and instructions well defined. Quality Management System covers all management processes based on a well-established and structured documentation, the main objective being „focus on
It is very important to talk about regulations and procedures, because these are made by certified persons who take into account the activities of hospitals, both on the management principles and also in terms of medical practice. The specialized literature (Csiki et al.) presents the main purposes of quality management in healthcare organizations: quality assurance processes of diagnosis and treatment; identification, assessment and prevention of errors; quality assurance structure (space, circuits, equipment); evaluation, quality assurance and improvement process and finished product; continuous development of human resources organization. These goals can be achieved through a quality management system well implemented. Moreover, our literature mentions a number of advantages obtained by implementing a quality management system in health organizations:

- building a positive image in the market,
- increase patient satisfaction,
- high degree of confidence in the medical unit,
- improve service quality,
- empowerment of staff,
- improving performance indicators,
- increased effectiveness,
- development of quality culture.

### 3.2. The benefits of implementing a quality management system in Romanian hospitals - between theory and reality

As mentioned, in order to demonstrate these advantages we started to analyze the degree of satisfaction of patients that was hospitalized in a hospital with a quality management system implemented and certified, because we wanted to see if the satisfaction is high. It should be noted that this hospital is one of the largest service providers in the public health sector and has a very good image on medical market in Romania. Over 60% of respondents were of the opinion that this hospital services received are better than other hospitals in the country.

Taking into account the important aspects such as the behavior of employees (doctors, nurses, nurses), quality of auxiliary services (alimentation, cleaning), informations on the health and quality of care, patients were asked to express a general impression about the services provided by the hospital. For each questions the percentage of patients with a high degree of satisfaction was over 50% and in the case of the doctor-patient relationship over 80%. These answers, coupled with the fact that over 60% of respondents decided to come back in the same medical unit if they will need of care, indicates that the working hypothesis from which we started is true and the patients degree of satisfaction is really high.

Analyzing the performance indicators of hospital, compared to the period when there was not implemented a quality management system, we noticed that some improvements have occurred, especially on quality indicators. In this way, we deduce that there was an efficiency in each process activity and also, increased clinical efficacy. The attention that was paid to the documentation and taking responsibility to meet the objectives of quality, by the top management, are evidence that there is already formed a quality culture that guides medical and auxiliary staff in their daily work. Therefore, we can say that we found in practice, all the benefits mentioned by the literature. So, we have the concrete evidence that system deficiencies can be overcome and we can obtain high quality services, according to the real needs of patients.

**Conclusions**

Although the study included one hospital unit, the positive aspects noticed and demonstrated by analyzing the degree of patient satisfaction, enables us to say that, at present, there is significant improvement in hospital activity compared to previous years. The trend of improvement can be maintained by the involvement of top management and by promoting the importance of granting high quality services, without any condition or impose any restriction to patients. The necessity to implement a quality management system in all public hospitals is a reality. All those surveyed in our study believe that "patient orientation" should be the basic principle of any medical units and over 96% agree with the statement that "continuous quality improvement of health services" is a principle that leads at performances in medical units.

The efficient quality management system requires the development of plans covering all quality dimensions and a specific documentation, so that the quality objectives to be achieved successfully. For that the results to match of expectations, is necessary to apply rules and procedures of good practice in all hospital management subsystems (management subsystem, human, social, technical, informational, informatic, decision-making).

**References**


