A STUDY ON SUSTAINABILITY AND IMPROVEMENT OF QUALITY IN HEALTH CARE: COMPLIANCE OF KAYAKALP - QUALITY STANDARDS

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ABSTRACT

India is the second most populous country in the world, with over 1.35 billion people (1,35,34,80,791- July 2015) which is almost one sixth of the world's population and it is projected to be the world's most populous country by 2022. Due to a highly populated developing economy it faces diverse issues like unemployment, financial inequalities, political instability, lack of infrastructural growth, low standard of living with burden of improvement in Public health and hygeine. The MMR of India is 178 which is so high as compared to MMR of UK (9) and IMR of India is 38 as compared to IMR of UK (4) which shows the alarming problems of health care facilities. To improve this scenario and develop the public health system and facilities, Ministry of Health and Family Welfare, Government of India launched KAYAKALP-Award to public health facilities in May, 2015. It was launched to fulfill the requirement of Quality Improvement and to complete the mission of "Swatch Bharat Abhiyaan." The Process of compliance (GAP-Closer) of Quality Standards at different level by Internal, Peer, External Assessment, willhelp to Sustain and Improve Quality by (1) Provision of Proper Financial Funding, (2) Availability of Proper Infrastructure, (3) Availability of Proper Qualified Human Resources, (4) Provision of Proper Guidance, Training for Skill Improvement and Capacity Building of employees, (5) Implement Proper Documentation of Record, forms, SOP, Policy, Licenses, Act, Guidelines (6) Fulfilling the requirement of Equipments & Instruments, Consumable and Non-Consumable items. This paper tries to study the process of implementation and benefits of KAYAKALP-Quality Standards for Sustainability and Improvement of quality in public health facilities.

Keywords: Kayakalp, Health System, Globalization, Quality Standards.

INTRODUCTION

Government of India launched KAYAKALP- Awards for public health facilities for fulfill the requirement of quality improvement and sustain quality in health care facilities. This project will become landmark for verdict of Sustainable quality in public health care facilities by National Quality & Health Standards

The Swachh Bharat Abhiyaan launched by the Prime Minister on 2nd October 2014, focuses on promoting cleanliness in public spaces. Public health care facilities are a major mechanism of social protection to meet the health care needs of large segments of the population. Cleanliness and hygiene in hospitals are critical to preventing infections and also provide patients and visitors with a positive experience and encourages healthy behaviour related to clean

environment. As the first principle of healthcare is "to do no harm" it is essential to have our health care facilities clean and to ensure adherence to infection control practices. Swachhta Guidelines for Public Health Facilities are being issued separately. To complement this effort, the Ministry of Health & Family Welfare, Government of India is launching a National Initiative to give Awards to those public health facilities that demonstrate high levels of cleanliness, hygiene and infection control.

Kayakalp-Award to public health facilities is one of such awards for fulfillment of the requirement of Quality Improvement and Sustain Quality in Health care Facilities and complete Mission of "Swachh Bharat Abhiyaan". The level of cleanliness of public spaces in our country including in health facilities is a cause for concern. Cleanliness is important not only from the point of view of aesthetics, but

also because lack of cleanliness and hygiene are a major cause of ill-health. With the launch of the Swachh Bharat Abhiyaan on Gandhi Jayanthi, 2014. The Prime Minister reiterated our social responsibility as citizens to help fulfill Gandhiji's vision of Clean India.

The perception of patients and the public regarding the level of cleanliness and ambience of a facility directly affects the level of confidence they have in the health care offered in a facility. Low levels of cleanliness in our public hospitals are a deterrent to use by people. Lack of cleanliness is also a contributor to hospital acquired infections. The Swatch Bharat Abhiyaan provides us with an opportunity for targeted focus on corrective action within our hospitals so that we meet quality standards. Implementing the Swatch Bharat Abhiyaan in hospitals also provides us with an opportunity to educate the public about personal responsibility for cleanliness in the spaces they occupy. The key message of our education efforts should be that the hospital should ensure the highest standards of cleanliness, each patient and hospital visitor has a social responsibility to practice and propagate cleanliness. The role of influence in adopting hygiene practices is well known. Patients and attendants, who see a clean health facility, will be more motivated to adopt healthy practices. All public health facilities can make hospitals an area of patient education on healthy and hygienic

REVIEW OF LITERATURE

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- D. Subashini and S. Poongodi (2016) in the research paper "Service Quality and Patients' Satisfaction in Health Care Sector with reference to Erode District" tried to explore the concept of service quality in a health care sector and patients satisfaction in hospitals. The study was conducted on the basis of five service quality dimensions and it is found that responsiveness is highly influenced by the respondents. It is also found that obtaining feedback from patients is important in order to improve the quality of health care services.
- Hayat Belaid, et.al (2015) in the research paper "The Quality of Health Services in Bechar Public Hospital Institution" highlited the fact of health service quality in public hospital institution and its impact on patients satisfaction. It was found from the study that lack of

- skilled service force results in negative satisfaction of respondents.
- S.M. Irfan and A. Ijaz (2011) in the research paper "Comparison of Service Quality Between Private and Public Hospitals: Empirical evidences from Pakistan" compared the quality of healthcare services delivered by the public and private hospitals to gain patient satisfaction. The study revealed that private hospitals are delivering better quality of services to the patients as compared to public hospitals. The private hospitals focused on their patients demands and developed themselves in order to provide quality healthcare facilities to their patients. All the people including doctors, nurses and supporting staff are aimed to provide care to the patients, providing clean and healthy environment to both patients and their attendants and proper facilities in the hospital and development of feedback mechanism.

OBJECTIVES OF THE QUALITY STANDARDS

The objective of having quality standards is to achieve and maintain an acceptable standard of quality of care, to make services more responsive and sensitive to the needs of people, to improve the availability of and access to quality health care of people. The quality has two components, i.e., technical quality and service quality. Technical quality, on which service providers are more concerned and has bearing on outcome or end result of services delivered. Service quality pertains to aspects of facility based care and services for which patients are more concerned and has a bearing on patient satisfaction.

This paper helps to identify the problems and challenges faced by organization and employees during Implementation of Quality Standards in the organizations and help to identify corrective and Preventive action taken by the organization for improving the quality in their organization by quality standards.

DATAANALYSIS

Ho1: Challenges faced by employees during implementation of quality standards have no significant relationship with type of hospital i.e. public and private.

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Correlations

			type of	continuous	improves	creates	challenging	higher
			hospital	accreditation	Quality	problem		authority
	type of hospital	Correlation Coefficient	1.000	172	206	088	209	.039
		Sig. (2-tailed)		.007	.001	.164	.001	.536
		N	500	250	250	250	250	250
	continuous accreditation	Correlation Coefficient	172	1.000	.771	023	.813	655
		Sig. (2-tailed)	.007		.000	.717	.000	.000
		N	250	250	250	250	250	250
	improves Quality	Correlation Coefficient	206	.771	1.000	.551	.992	184
		Sig. (2-tailed)	.001	.000		.000	.000	.003
		N	250	250	250	250	250	250
Spearmans rho	creates problem	Correlation Coefficient	088	023	.551	1.000	.447	.214
		Sig. (2-tailed)	.164	.717	.000		.000	.001
		N	250	250	250	250	250	250
	challenging	Correlation Coefficient	209	.813	.992	.447	1.000	186
		Sig. (2-tailed)	.001	.000	.000	.000		.003
		N	250	250	250	250	250	250
	higher authority	Correlation Coefficient	.039	655	184	.214	186	1.000
		Sig. (2-tailed)	.536	.000	.003	.001	.003	
		N	250	250	250	250	250	250

Interpretation: To study the relationship between Challenges faced by employees during implementation of quality standards and type of hospital, correlation test was applied to see the type of relationship between various challenges and hospital category. The correlation between five variables was tested at 0.01 level of significance and a significant positive and negative correlation were seen among variables under study.

- Continuous accreditation of quality standards in hospital has a high positive relationship with problem and Issues like H.R., finance, team work, leadership, training, proper infrastructure, availability of equipments & instruments, documentation, establishment of vision- mission & goal, spirit or ambitions of employees for its implementation and sustain & improvement
- Quality of health Facility has a high positive correlation with implementation of quality standards, creating certain issues between higher authority and employees.
- Implementation of quality standards is a challenging process and has a high negative correlation with type of

hospital

- Implementation of quality standards is a challenging process has a high positive correlation with improvement in quality of health facility.
- Implementation of quality standards, create certain issues between higher authority and employees which has high negative correlation with continuous accreditation of quality standards in the hospital.
- When type of hospital attribute is correlated with the major challenges we can see the following results:
- Continuous accreditation, improves quality, creates problem and challenging have negative correlation with the type of hospitals, and
- Only higher authority is positively correlated with the type of hospital

Significant correlation values can be seen from the table where variables under study are correlated with each other either in positive or negative manner. Thus, we can interpret that the challenges faced by organizations during implementation of quality standards have a significant relationship with type of hospital.

H02: Service quality of type of hospitals have no relationship with accreditation of quality standards.

Table: Classification of Hospitals on the basis of Standard Accreditation

Standard Accreditation							
	Public	Public Private					
Yes	6	16	22				
No	24	4	28				
Total	30	20	50				

Interpretation: The public and private hospitals were segregated on the basis of implementation of quality standards. out of 20 private hospitals 16 have accreditation to one of the quality standards and out of 30 public hospitals only 6 have some quality standard accreditation. the objective To analyze the corrective and Preventive action taken by the organization for sustain and Improve quality in their organization by quality standards. Was assessed by the null hypothesis. the chi square test was applied whose results are shown below

Table: Chi Square Value

Tabular Value	Calculated Value	Degree of Freedom	H0 Accepted or Rejected	
3.84	17.54	1	rejected	

Interpretation: The null hypothesis is rejected when tested by applying chi square to test the association between two attributes i.e. service quality of type of hospital and quality accreditation at 95% level of significance and 1 degree of freedom. The calculated value is much greater than the tabular value and so the null hypothesis is rejected and we can interpret that the service quality of hospital have a strong relationship with accreditation of quality standards which proves that various quality standards can improve the service quality offered by public and private hospital to ensure proper health management of the community.

It is recommended that hospital should be accreditated with appropriate quality standards to maintain a better level of service quality which can enhance the brand image and popularity of hospital among employees and patients. The standard accreditations should be adopted even by public hospitals for the betterment of health services.

CONCLUSION

Continuous improvement and sustainability is a cause for concern among service providers so that quality assessment is done through systematic techniques and involves a process which is rational and have a strategic vision of quality. In the contemporary context of quality standards in health specially within the scope of hospitals, significant focus has been placed on the implementation of quality standard and accreditation system which is defined as a systematic method allowed for quality assessment of services. The study revealed interesting information about the inclination of public and private hospitals towards adoption of quality standards. It is clear that the success of implementation and monitoring of accreditation depends on rational, innovative and participative human resources. he employees and the

Quality in health is a multidimensional phenomenon and bears a stake towards all the entities associated with the organization. Hospital category and type may have different views, benefits and difficulties related to implementation and maintenance of quality standards. The challenges faced by the organizations revealed that a culture should be created as implementation requires changes in the work processes and may be obstructed by various issues like workforce resistance, unawareness, lack of knowledge, staff turnover and so on.

In recent years, much efforts and energy has been directed to improve the quality of care in both public and private sector. The new health policy has also changed the vision of hospitals and the performance scores of hospitals have changed.

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