A SPECULATIVE STUDY OF SOUTH RAJASTHAN HOSPITALS: CONTINUOUS IMPROVEMENT FACTOR (TOTAL QUALITY MANAGEMENT)

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- ABSTRACT -

Human life today is longer and healthier than ever before in the history of the world. Man cannot live forever, nor can he enjoy perfect health always, but in both life and health every normal person would like his full share. Human life is sacred and Health care deals with human lives. This places tremendous responsibility on the shoulders of health care service providers to maintain a high level of service quality and to constantly strive to improve it. The importance of service quality in health care is obvious. In both developing and developed countries Healthcare is remarkably the fastest growing service.

Structured questionnaire was used as a primary tool for data collection. The questionnaire contained both close ended and open-ended questions. The sample sizefor this study was 100 respondents who are the medical staff which included Doctor, Administration staff, Nurse and Technician at various Government/non-government /private sector college of medicine & hospital of south Rajasthan.

In present study we found that according to respondent in Government medical college attached Hospital has not continues improvement as part of Quality of healthcare service. Opposite to that Corporate Hospital has highest number of respondent responses regarding continues improvement in quality of health care. In government medical college attached hospital 48 % Respondent have view that there is no continues improvement. But in Corporate Hospital 50 % respondent agrees with continues improvement as part of quality time to time.

In present study I found two main things, one thing was TQM is not implemented properly in government hospital and private hospital, which is well implicated in corporate and private medical college attached hospitals. Second thing was Continuous improvement is most important factor of entire quality management which directly affect the quality health care services.

Keywords: Total Quality Management (TQM), Continuous Improvement, Service Quality, Hospital Management.

INTRODUCTION

Healthcare has been recognized as extremely necessary for satisfying and holding customers. Quality becomes a crucial and core dimension in satisfying client. the case looks that quality and satisfaction become parallel to every alternative. consequently, the 2Q's first, what's perceived service quality? And second," How should service quality be measured?" are debated by lecturers over the last three decades currently and is of utmost interest. Thus, the importance of each service quality and client satisfaction to service suppliers has received respectable attention within the selling literature in recent years (Sureshchandar et al, 2002)

In India, Income from the healthcare sector accounts for

5.2% of the GDP, making it the 3rd immense growing sector in India, Healthcare industry only industry that grows very fast speed and stands untouched by any recession and a compounded annual growth rate (CAGR) of 15-20 % for the next 5-10 years.

Biggest challenge for India in health sector is rapid changing in lifestyle of people, characteristic of diseases, which cause the chronic disease burden, which alarm signal for the governments and private sector so there is need to make policy and implement program to improve quality services in health sector.

For this purpose, there is some tool and approach that measure quality given to patient. Before that we should know that quality care reached to patient can be substitute into two types: quality assurance (QA) and quality improvement (QI).

QA concentrating on to ensure that requisite infrastructure, supplies and trained staff are used for to facilitate delivery of quality care.

QI approach is focus on equipping healthcare workers and administrator with skills to locate and solve problems at their respective level.

Because of this some researcher develop system-Total quality management. In TQM, various principles (factor) are used to prevent clinical and administrative problems, which include customer focus, continuously improvement, leadership, training, employee empowerment, teamwork that help to provide healthcare services better and identification of all this factor which is responsible for the quality of health services. (1) Anther thing in TQM is its development and its validation is important as it as its implementation. (2)

One of above factor is continue improvement which is one of the most important factors is responsible for giving good quality of health care services according to many researchers. The constant improved process aims to verify and discard the cause of a mistake in order to prevent its reoccurrence. Continuous improvement, in general, is defined as: "an ongoing effort to enhance the measurable performance of a product, service or process."

Healthcare continuous improvement is defined here as "systematic, data-guided activities designed to bring about the measurable enhancement of the delivery of supportive services in healthcare settings."

REVIEW OF LITERATURE

Turney and Anderson defined continuous improvement as

the relentless pursuit of improvement in the delivery of value to customers.(12)

Constant improving means 'a bond to constant examination of the technical and administrative process in search of improve methods' (Fuentes-Fuentes et al, 2004).(13) This was supported by Dean and Bowen (1994), who argued that customer desire can be attained only through the relentless improvement of processes that create product or service.(14)

According to Muffatto and Panizzolo, Total quality management includes the design into the process of production, a system of continuous improvement. This contains regular cycles of planning, execution and evaluation.(15) According to Oakland (1993), 'the focus on continuous improvement will be shown someone to the formation of formidable team whose associate ship is determined by their work on the detailed knowledge of the process, and their ability to take improvement action'.(16)

TQM is concerned with the continuous improvement in all the process of production, from the levels of planning and decision making to the execution of work by the front line staff.

Stahl (1995) said that, "continuous improvement refers to the constant refinement and improvement of products, services and organizational system to yield improved value to customers". He further explained that the continuous look for ways in improving standard of product or service in the absence of customers' complain may prevent a future problem.

Fuentes-Fuentes et al, (2004) describe that organizations operating in a dynamic environment are liable to carry up continuous improvement in its operation.(4)

Marra (2005) comments that focusing on the customer is the fastest and most positiveway to create and sustain meaningful change within the organization.

Westen (2003), It is not just the staff who are directly interacting with the customer whoneed to be focused on their needs but the whole organization needs to be focusing towards this single vision; this view is supported.

Tan and Lim Chai Soon (2000) examined the extent to which health counseling and TQM practices in 3 hospitals of Australia and were influenced by patient characteristics, medical care processes and organizational factors. It was seen organizational factors were more important than the patient characteristics in determining health counseling.

RESEARCH METHODOLOGY

The main objective of the study was to find out the opinion of

healthcare workers regarding the Continues improvement factor in the different types of hospitals.

Structured questionnaire was used as a primary tool for data collection. The questionnaire contained both close ended and open-ended questions. The sample sizefor this study was 100 respondents who are the medical staff which included Doctor, Administration staff, Nurse and Technician at various Government/non-government/private sector college of medicine & hospital of south Rajasthan.

Purposive sampling procedure was used for selecting individuals for a study. The questionnaire was given to the selected Doctors, Nurses, Administrators and Laboratory technician at Hospital, Questionnaire collected after a week to allow the respondents to answer them in their free time.

In Present study, we used descriptive statistics is used to analyze data and represented with the help of graphs. The results of data analysis are shown in form of tables for interpretation. MS Excel software tools to aid in carrying out descriptive analysis from the quantitative data collected using questionnaires.

DATA ANALYSIS AND INTERPRETATION

Table-1: Demographic Profile:Professional Category of Respondent

Doctor	Management Staff	Nursing Staff	Technician	
25	25	25	25	

Table-2: Demographic Profil	e: Duration of service (Year)
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Duration of service (Year)	Number of respondent	Percentage
0-2	26	26
3-5	32	32
6-8	28	28
9-11	6	6
12-14	3	3
15 and above	5	5
	100	100

Table-3: Presence of Continuous Improvement in Healthcare Institute

Responses	Numbers of Responses	Percentage
Strongly Disagree	12	12
Disagree	18	18
Neutral	48	48
Agree	14	14
Strongly Agree	08	08
	100	100

The data suggest that the most of the healthcare professionals are neutral about the presence of continuous improvement in healthcare institutes.

Table-4: Presence of Continuous Improvement factor in Various Health Institute

Responses	Government college of medicine & hospital & CHC	Private college of medicine & hospital	Corporate Hospital	Non- govern- ment Hospital
Strongly Disagree	10	02	00	00
Disagree	09	02	01	06
Neutral	17	08	03	20
Agree	02	06	02	04
Strongly Agree	02	02	02	02
	40	20	08	32

According to the data there is difference in opinion of the public and private hospitals. The public health care professionals are not willing for the change.

	QUESTIONS	1	2	3	4	5
1	The benchmarking between the hospital and others are		38	25	10	05
	done to learn from others experiences.					
2	The hospital is mainly focused in applying the concept	36	40	14	12	06
	of TQM at all administrative levels one by one					
3	Mainly problems are usually resolved.	20	28	27	15	10
4	The management of our hospital supports a long-term	20	25	35	12	08
	quality improvement process					
5	Our hospital's top management provides the necessary resources for continuous improvement	34	16	32	10	08
6	Employees participate in continuous improvement	40	18	24	08	10
	decisions					

Table-5 : Continuous Improvement in Health Institute

1= Strongly Disagree 5= Strongly Agree

Majority of the healthcare professionals are disagreeing with the presence of continuous improvement practices in the delivery of healthcare services.

Responses	Medical	nment College & and CHC	colleg	medical ge and pital		Corporate Hospital		Private Hospital	
		%		%		%		%	
Strongly Disagree	10	25	02	10	00	00	00	00	
Disagree	09	22.5	02	10	01	12.5	06	18.75	
Neutral	17	42.5	08	40	03	37.5	20	62.5	
Agree	02	05	06	30	02	25	04	12.5	
Strongly Agree	02	05	02	10	02	25	02	6.25	
	40		20		08		32		











CONCLUSION

In present study I found two main things, one thing was TQM is not implemented properly in government hospital and private hospital, which is well implicated in corporate and private medical college attached hospitals. Second thing was Continuous improvement is most important factor of Whole quality management which directly affect the quality health care services as we seen in government hospital and attached CHC where quality is not up to mark. After all to improve quality of health sector there is need to execute properly implement all factor of total quality management.

SUGGESTIONS

Based on the literature reviewed, data collected and personal interaction with the respondents I would like to give following suggestions for implementing continues improvement in health care services:



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