

Example of quality management assessment summary essay

[Business](#), [Management](#)



Introduction

Lately, in health care organizations, performance-management systems are very essential when it comes to operations and strategic management. This can be attributed to the increasing demand for better performance as well as lucidity from stakeholders, regulators, customers and the sponsors. In most case, goals and objective of an organization acts as the basis of performance-management systems. Performance-management in healthcare organizations goes hand in hand with quality management. In this context, quality management refers to the part of management that is concerned with policy of quality as well as the production function of an organization. Precisely, it refers to an assessment of services that are offered and results attained in comparison to the accepted standards. In health care, quality management include but not limited to demand management, disease management, best practices, patient safety, evidence-based medicine/practice and cost-effectiveness.

Purpose of quality management in healthcare organizations

Arguably, customers have become more complicated, more knowledgeable and their anticipations have grown in the recent times. Thus, the only way organizations are going to survive is by committing themselves to offering quality services and products. As a matter of fact, healthcare organizations operate under the same market conditions like organizations that are under the product industry. Therefore, quality management is used by management in the healthcare organizations as a framework to steer their organization towards better or rather enhanced performance, (McLaughlin &

Kaluzny, 2006). Notably, quality management in healthcare deals with issues to do with the customers, leadership, process approach, involvement of people, continual improvement, mutually beneficial supplier relationships and factual approach in decision making.

Undeniably, there are many terms and names that are used to describe quality management. Some of such terms include, total quality management, continuous quality improvement, performance improvement, and performance management. The main reason why this is the case is because the term “ quality” can be defined in various ways depending on who is making the definition. Even before healthcare professional, this term have different definitions. Due to the fact that this term has different meanings depending on the context in which it is being applied, the distinctions of these terms is very important. The most commonly used term in my organization is performance management, (Brand, Lam, Roberts, Gorelik & Amatya, 2009). Performance management can be defined as the activities that are undertaken to ensure achievement of goals occurs consistently in an efficient and effective manner.

Key concepts of quality management

Basically, there are various concepts in quality management. However, the key concepts in within the context of quality management in healthcare are; quality audit, quality objectives, quality assurance, quality plan and quality control.

Quality plan. This refers to a plan that has been created by the management of the organization breaking objectives into a work break-down framework. It involves breaking down the activities of the project of the organization into lower-level activities up to the point where specific quality measures have been identified. This is then followed by the actions have been acknowledged and executed in the order that will lead to realization of the expectations and requirements of the customer, (Marsteller, Woodward, Underwood, Chun-Ju, & Barr, 2011). Perhaps, this enables the management of a healthcare organization to guarantee the customers that they will get the quality of services that will satisfy their needs. A good quality plan identifies both internal and external customers as well as act as a basis of the process with the features that lead to provision of the services desired by the customers.

Quality assurance. Quality audit can be defined as an autonomous assessment that is undertaken by qualified employees that ensures that the project that is being undertaken meets the quality needs and following the conventional quality policies and procedures. Arguably, a good quality audit should ensure the following: that the project will lead to the expected quality; the services and products to be produced will be safe and fit consumption that legal issues are adhered to in the process of providing the service; opportunities for improvement are indentified; and the right actions are undertaken when necessary, (McLaughlin & Kaluzny, 2006).

Quality assurance. This is a methodical examining and assessing of the various phases of a service, project or a facility in order to maximize the

chances of minimum quality standards are being achieved by the process of production. There are two crucial principles that are incorporated in quality assurance; “ fit for the purpose’, which implies that healthcare services being provided should be appropriate for the intended purpose, and “ right first time”, which implies that mistakes should be minimized. It should be noted that quality assurance does not absolutely guarantee provision of quality services and products.

Organizational long-term and short-term goals

Arguably, there are various goals that most healthcare organizations aim to achieve by implementing quality management strategies. One of the long-term goals is achieving cost effectiveness in the operations of the organizations. This involves application of techniques and principles of cost-effectiveness evaluation in healthcare. Besides, the organization aims at developing an ability to integrate cost and economic outlooks in clinical-decision making with an aim of reducing total costs, (McLaughlin & Kaluzny, 2006). The second long-term goal is customer satisfaction. Lately, competition in the healthcare industry has increased considerably. Therefore, for the organization to remain competitive, the management has to find ways of satisfying the needs of the customers in order to create loyalty in these customers. The third long-term goal is to increase the revenue of the organization. This can only be realized if the overall performance of the organization is enhanced.

On the other hand, the first short-term goal is reduction of errors in the organization. Undeniably, a number of healthcare organizations have been

held responsible for errors which could have otherwise been avoided. Thus, there is need to put into place mechanisms which can help reduce such errors to avoid unnecessary costs. The second short-term goal is promote teamwork among the employees of the organization. In healthcare industry, teamwork is a very crucial factor for an organization to survive, (Marsteller, Woodward, Underwood, Chun-Ju, & Barr, 2011). Precisely, within the context of quality improvement, a team acts as a basis through which analysis of problem can be done, solutions are produced and change is appraised. Thus, for the organization to achieve its long-term goals concerning the quality of its services, it must ensure that teamwork within the organization is being promoted. The third short-term goal is generating resources which could propel the organization to reach its long-term objectives. This will be undertaken by starting cutting down unnecessary operational costs that are met by the organization.

Government policies

The government plays a very crucial role in the healthcare industry. Like in the product industry, there are some regulations that the government has implemented and must be followed by the healthcare organizations. For instance, pricing in this industry is highly regulated. There are standard prices that have been set for certain healthcare services by the government. This basically, to make this services available for all members of the society. Additionally, there are some quality standards that have been set by the government which must be met by the healthcare organizations, (Sciacovelli, Secchiero, Zardo & Plebani, 2010). To some extent, over regulation of

healthcare organizations by the government may negatively affect the quality of services that are provided by these organizations. For instance, pricing in the healthcare industry is guided by the forces of demand and supply, just like for the case in the product industry. Therefore, sometimes government regulations may create an imbalance between these two forces which may compromise quality of services provided by the healthcare organizations.

Resources

Resources, more especially human resources, are the most important elements for organizational performance. As a matter of fact, if a healthcare organization lacks enough resources, definitely it will not be in a position to offer better quality services to its customers. Precisely, lack of enough may compromise production of better quality healthcare services.

Technology

Unquestionably, technology affects almost all the sectors within the economy. Within the context of healthcare, technology has a great impact in the quality of services and products that are produced in this industry. In most cases, technology has had positive impacts in healthcare. However, if misused the quality of services that are produced by a given healthcare organization may be compromised.

Competition

It is evident that there is considerable competition among healthcare organizations. The situation has become even more complicated lately with

globalization of healthcare. This implies that for a given healthcare organization to remain competitive in the national as well as international market, it has to take certain strategic measures. Sometimes conflicts arise between national objectives and the global objectives. Although competition may result to production of better services, in some cases healthcare organizations undertake a strategy that will improve their competitiveness in the market but which negates the objective of quality management.

Organizational culture

Organizational culture also has an impact in the general performance of an organization. In this case, organizational culture refers to the values, beliefs as well as way of doing things that must be observed in a given organization. For instance, if there is a culture of teamwork in the organization, there are high chances of improving the performance of the organization in general and production of better quality products and services. However, if the spirit of teamwork lacks among the workforce of the organization it will be difficult to produce quality products and services.

Relationship between risk management and quality management and how they relate to performance management

The term “ risk management” is used to imply the strategies that are undertaken to decrease the chances of a specific loss. The methodical collecting and utilization of data are indispensable to risk management and practice. Notably, risk management programs entail both reactive and proactive components. Reactive components involve reactions to adverse

incidents while proactive involves actions to prevent adverse incidents. Notably, the process of risk management include; diagnosis, assessment, prognosis and management. On the other hand, quality management refers to the part of management that is concerned with policy of quality as well as the production function of an organization, (Scott, 2009). The main association between these two is that they both have the same objectives towards performance management. For instance, risk management

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