Chapter 8  Quality now and the future

Measuring the quality of care and ensuring that patients receive the best possible care within the resources available has been the theme throughout this book. In the light of the Government’s White Paper, *Working for Patients*, this issue has never been more important than it is today. Within this new business management approach, there is the need for the introduction of a quality culture. A strategy for the Health District; and then hospital and local services, will need to be developed to ensure that patients receive a high quality of care.

The information in this book will help you to make informed decisions about which quality assurance tool would be most appropriate to use to measure the quality of patient care in your particular clinical area. All practitioners, including nurses, have a responsibility to measure the quality of care that they are giving and to take action when the results indicate that the provision of care needs to be improved. Nurses have been systematically measuring the quality of care for many years by using the tools that have been included in this book.

Medical audit

Our medical colleagues are involved in medical audit, a systematic, critical analysis of the quality of medical care, which includes the procedures used for diagnosis and treatment, the use of resources and the resulting outcome for the patient.

Clinical outcomes (nursing)

This systematic, critical analysis could equally apply to nursing. For example, tracking and analysing incidences such as pressure sores, infections or other complications.

Resource management

Nurses in six hospitals around the UK have been taking part in the Government’s Resource Management Initiative. These six pilot sites are as follows:

- Arrowe Park Hospital, Wirral are using ANSOS software, a personnel system, and are developing a ward-based nurse management and information system.
- Freeman Hospital, Newcastle-upon-Tyne are using a system based around criteria for care, which has been developed by Freeman and ISTE. The system currently assesses workload with a nurse personnel component under consideration. Care planning is not computerised.
- Guy’s Hospital, London is using the FIP ward system which was developed by West Midlands Regional Health Authority. This system contains workload assessment and nurse personnel facilities. Care planning is not computerised.
- Royal Hampshire County Hospital, Winchester is involved in the Wessex Regional Information Strategy Project (RISP), and the system being developed within this framework, TDS (formerly Technicon), is an integrated communication and ordering system. Nursing staff are developing the ward management information system to meet their needs.
- Royal Infirmary, Huddersfield is using Excelcare marketed by Price Waterhouse and developed by the nursing staff. The system includes computerisation of documentation for nursing care plans combined with workload assessment and the measurement of outcome standards. This system is linked with ANSOS, the nurse personnel system.
- Pilgrim Hospital, Boston, South Lincolnshire is also using criteria for care as the basis for developing an ICL system. The nursing systems are being developed to include a nurse tracking module, following development work on integrating feeder systems for hospital computer network.
Quality assurance programmes

All quality assurance activity must be part of the whole system, and therefore part of both the District and Regional strategy for quality assurance.

1. The Regional Health Authority and quality assurance

The Regional Health Authority is accountable to the Secretary of State for the performance of District Health Authorities and the quality of patient care services provided in all districts. In order to fulfil this accountability, the Regional Health Authority must ensure that the District Health Authorities measure the aspects of the service that will indicate the quality of patient care in a particular district. This can be achieved by each district producing a quality assurance plan and programme, the results of which are reviewed by the Regional Health Authority. The library should have a copy of the Regional Health Authority Plan and also be able to establish if your Health Authority has a quality assurance plan.

2. The District Health Authority and quality assurance

The development of a quality assurance plan will vary from one District Health Authority to another. In some districts, the District General Manager will develop the plan, while in others there may be a named individual who has designated responsibility for quality assurance for the whole district, a unit or a care group. In some cases, the manager of a unit or care group may be asked to develop a plan for a department, unit or care group.

Total quality management

Total quality management is an important and vast subject, but perhaps within the context of this book it is appropriate to give only a very broad outline. In industry, the approach to quality has been traditionally to produce the product or complete the job, then inspect or check it, and screen out, or in some cases re-do, what is not right. In the National Health Service, quality assurance activity is based on audits, such as those discussed earlier in this book, reviews and surveys. Many of these tools establish what went well or badly after the event – that is, retrospective audit. The results of these initiatives lead to the evaluation of what happened and the development of action plans to improve the quality of care. As mentioned earlier, action taken after the event is less helpful to the patient, who would much rather that things were corrected while he/she was receiving care.

What is needed is a system that is designed to prevent poor quality patient