

CONSIDERATIONS REGARDING THE MEDICAL SERVICES QUALITY

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Abstract: *The quality of a service is often defined as "an ensemble of characteristic proprieties of a service that make it suitable to meet the explicit or implied needs". Taking into account the services' characteristics (intangibility, variability, inseparability, heterogeneity, etc.), quality can hardly be defined, assessed or expressed in quantitative terms. It should be perceived, both in relation to the medical care process and to the results expressed by the patients 'satisfaction. The assessment made by the patient is an absolute and final measure of the medical service quality.*

Keywords: *quality, intangibility, inseparability, variability, non-storage and outage, patient's satisfaction*

Rezumat: *Calitatea unui serviciu este definită cel mai adesea ca "un ansamblu de proprietăți caracteristice ale unui serviciu care îi conferă acestuia aptitudinea de a satisface necesitățile, exprimate sau implicate". Date fiind caracteristicile serviciilor (intangibilitate, variabilitate, inseparabilitate, eterogenitate etc.), calitatea este greu de definit, ea trebuie percepută atât pe baza procesului de prestare a serviciului medical, cât și a rezultatelor propriu-zise, exprimate prin satisfacția pacientului. Evaluarea efectuată de către pacient constituie măsura absolută și finală a calității serviciului medical.*

Cuvinte cheie: *calitate, intangibilitate, inseparabilitate, variabilitate, nestaocabilitate, satisfacția pacientului*

INTRODUCTION

The quality of a service is often defined as "an ensemble of characteristic proprieties of a service that make it suitable to meet the explicit or implied needs".

Due to the characteristics of services (intangibility, variability, inseparability, heterogeneity, etc.), quality can hardly be defined, assessed or expressed in quantitative terms. It should be perceived, both in relation to the medical care process and to the results expressed by the patients 'satisfaction. The assessment made by the patient is an absolute and final measure of the medical service quality

In the broader sense, services (the medical services, as well) single out by four major characteristics:

1) Their nonmaterial form or their intangibility: by their nature, services are nonmaterial (invisible) and therefore, they are intangible. As against the physical

products, they cannot be seen, tasted, touched, smelled or heard before their consumption.

The task of the hospital as a service provider is to monitor this illustration of quality, in other words to render the medical services tangible, by fostering their image.

The above-mentioned tangibility may be achieved through a series of auxiliary means available for the healthcare facilities with beds:

- the quality of the location where the medical services are provided;
 - medical/auxiliary personnel who has to provide an operative activity image;
 - the equipment used must provide a firm image and bring a contribution in order to increase the trust in the quality of the medical service;
 - the communication instruments must be carefully selected in order to highlight the efficiency and care for services rendering processes;
 - patients' rights and duties must be observable and accessible;
 - the symbols and billposting must be clear, easy to be understood by the patients, as they are a warranty of the quality and consistence of the services;
 - the prices and rates imposed for certain services should represent a form of communication with the patients and should be displayed in observable places and presented in a sober but suggestive manner, in order to allow a quick consultation from the part of all those interested.
- 2) Time simultaneity and inseparability: usually the services are rendered and consumed at the same time. As far as the medical services are concerned, they have a personalized character and the person involved is part of the rendered services. Due to the involvement of the patient in rendering medical services, the interaction between the provider of the healthcare services and the patient has a special meaning, which may be explained by the fact that the patient's satisfaction may be influenced in a favourable manner by both parties.
- 3) Heterogeneity and variability: as the medical services are provided by the medical personnel, their quality tends to considerably vary from one provided service

to another. They are very much distinguished by the duration and quality of the services rendered, depending on who is the provider, when and where the services are provided. In order to reduce this variability, the hospital should be involved in the specialization of the personnel through sustained medical education and in the standardization of the components of the medical services.

- 4) Non-storage and outage: any service not performed within a reference period of time represents a loss that may never be recovered.

Strictly related to the quality specifications, certain specialists have identified the following dimensions of the services quality, adapted to the medical services: reliability, responsiveness, competence, access, consideration, communication, credibility, security, patient understanding/knowing, tangibility.

Later, the authors used six characteristics of services quality: tangibility, viability, responsiveness, insurance, empathy, non-valuation of the services, which brought about the patients' dissatisfaction.

The meaning of these characteristics may significantly vary based on the type of the medical services provided and on the users of the medical services (patients), so that within the assessment of the quality of the medical services, the weight awarded to different characteristics should depend on specific time and space coordinates of each medical service rendered.

The ISO 9004-2 standard recommends a clear definition of the requirements of the medical services, based on characteristics that may be recognized and assessed by the clients.

At the same time, it is necessary to define the processes related to providing medical services by the help of some characteristics which may not always be observed by the patients, but which have a direct influence on the quality of the results of the medical services.

In this respect, the above-mentioned standard proposes to take into consideration the following characteristics of services:

- Facilities (installations and equipment), capacity, number of personnel and available materials, technical equipment;
- Waiting time, length for rendering the respective services, length of processes;
- Hygiene, security, reliability;
- Capacity to react, accessibility, consideration, environment aesthetics, competence, operational reliability, accuracy, credibility, efficient communication.

The quality control is part of the implementation process regarding the supply of the medical services. This includes:

- Measuring and checking the main activities of the processes, in order to avoid the occurrence of the undesired trends and the patients' dissatisfaction;
- Self-control performed by the personnel charged with the supply of the medical services. Self-control is

considered as part of the process measurement;

- Final assessment of the patient interface performed by the medical services provider in order to acquire a personal point of view regarding the rendered services.

The assessment performed by the patient is an absolute and final measure of the medical service quality. The patient's reaction may be an immediate, a delayed or a retroactive one. The assessment of the medical services by the patients is often limited to a subjective assessment. The patients rarely inform the management of the hospital about their opinions regarding the quality of the services received.

Usually, the disappointed patients cease to use the medical services provided by the respective hospital.

The lack of a constant study of the degree of the patients' satisfaction, limited to the study of patients' complaints, may lead to wrong conclusions.

The patient satisfaction should be compatible with the professional standards and ethics.

The hospitals, as well as other healthcare units must set forth a permanent assessment and sustained measurement of patients' satisfaction. Within these assessments, both the positive and the negative reactions and their probable impact on the future activity of the healthcare units must be identified.

The patients' satisfaction assessment has to identify mainly the adequacy degree of the "descriptive document of service", of the processes specifications, as compared to the patients' requirements. In its capacity of service provider, the hospital often considers that the provided services are of good quality despite the contrary opinion of the patients. This disagreement shows the lack of adequacy of the processes specifications.

The assessment performed by the patient and the self-assessment performed by the medical service provider (hospital) must be compared in order to assess the compatibility of the two quality measures and to identify adequate actions to improve the quality of services.

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