

## Volume 12, Issue 4 /2010 - Roadmap to Top Quality

## Lack Of Transparency with Regard To Quality is Unsettling Patients

Patients hear little about the quality of services in hospitals. Their opinions and expectations are formed through discussions in social settings or their GP or healthcare provider act as a guide. The media also plays a role in forming opinions, often raising fears. But patients' expectations can be met by providing transparency with regard to quality in hospitals.

Ms. Ziltener explained that she is here to provide an external view on hospitals and quality. Her presentation was based on the point of view of patients, the response of hospital managers to her organisation's work, the press and different working groups.

According to Ms. Ziltener we subscribe to too high expectations of medicine. When a patient is admitted they have the expectation to undergo an extensive programme of care and to be cured. The problem arises when patients are not cured, when expectations conflict with reality. We need to help patients cope with this as they are not familiar with quality assessment.

Patients and their families interpret risks and complications as lack of quality, which leads to lawsuits. This is, in turn, worsened by the media. We do not learn of measures of consequences independent of guilt. Yes, this information is available in trade journals but the public does not access this information.

Patients are left alone for important decisions. When choosing a hospital, patients do not look to quality indicators/publications but to their friends, relatives; they ask about their experiences. They do not ask about quality assurance and just have to trust hospital personnel.

Ms. Ziltner believes that trust is key for quality and patient satisfaction. Independent of the reputation, in case of lack of transparency there is a lack of trust. Hospital managers must create this trust, including efforts for transparency. After all, wherever humans work mistakes are made. Transparency is the best pre-requisite for trust.

Publication of quality indicators is essential. It is clear that there is a lack of data, but what is available should be published, even if the numbers are low or hard to understand. The public also needs feedback on how hospitals deal with error. In this way we can learn what they do to prevent mistakes in the future. There needs to be a change in the error processing culture within our institutions, with feedback on consequences and measures taken. This will ensure that patients know the same mistake won't be made again.

Ziltner stressed that although transparency is not equal to quality, it often triggers more measures and acts as the first step to improving quality. As we all know, pressure can lead to improvements. Patients have the right to know what quality to expect during treatment. This in turn fosters compliance among patients.

To conclude, hospitals must promote standards, error reporting systems and quality competition instead of cost. Results must be published; there must be transparency of medical indicators and comparable performances. We need a knowledge-based medical system encouraging quality competition and collaboration between patient centres and hospitals.

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