

# Researcher examines impact of quality improvement efforts in Canadian hospitals

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A recent pan-Canadian research study from Queen's University has found that hospitals need to make improvement efforts a top priority and engage frontline health care professionals to be most effective in improving the quality and safety of patient care. The study suggests that improvements in key areas could lead to more efficient use of health care resources and improvements to patient care.

Queen's researcher and Professor, Dr. Dick Zoutman (School of Medicine and Graduate Program in Health Care Quality), was the lead author on the report. The study surveyed the chief executives at 125 Canadian acute care hospitals on how they were approaching improving the quality of care in their hospitals – defined through such metrics as a reduction in ER wait times, triage times, improving discharge processes and connecting patients with outside resources. Dr. Zoutman looked at how hospitals carry out their quality improvement activities, which staff were involved, as well as the major barriers to achieving success in the quality improvement initiatives.

"Improving the quality of the care in our hospitals is critical," says Dr. Zoutman, who also serves as Chief of Staff for Quinte Health Care.

"Quality of care should always be the paramount concern in all areas of health care. Yet our hospitals have struggled with the best way to deliver the kind of quality care everyone expects of us."

The study found that senior and middle management were most likely to be involved in a [hospital](#)'s quality improvement efforts, as opposed to

frontline staff. As a result, many survey respondents found that time constraints limited their ability to solve quality of care issues. The results of the study showed that involving the frontline health professionals was the key to the success of a hospital's quality improvement efforts. The hospitals surveyed who involved their frontline doctors and nurses in improving health care delivery found that their quality of care improvement efforts had a positive impact on patient safety (90 per cent), better patient care results (88 per cent), and patient satisfaction (77 per cent).

The most commonly reported barriers to quality improvement were a lack of investment (89 per cent), an inability to collect data on the quality of care they were delivering to their patients (81 per cent), and not involving the doctors themselves in solving quality of care problems (77 per cent). Dr. Zoutman explains that the Canadian [health care](#) system as a whole lags behind in quality improvement programs compared to other countries. For example: 26% of Canadians wait four or more hours to be seen in the Emergency Department. Canada ranks as the worst internationally on ED wait times and these long [wait times](#) have not improved much in the last 10 years.

"Improving the quality of the care we provide in our hospitals should be our top priority," says Dr. Zoutman. "However, it seems that quality improvement and patient safety programs are still in their infancy in Canadian hospitals compared to other industries such as automotive manufacturing and the airline industry. We know that quality improvement programs do have very significant positive impacts on the [patient care](#) experience."

Dr. Zoutman says the results of this "inadequate" investment in the quality of care hospitals deliver is telling, as only 29 per cent of Canadian hospitals reported that they had accomplished over 90 per cent of their [quality improvement](#) priorities.

**More information:** Dick E. Zoutman et al. Quality improvement in hospitals: barriers and facilitators, *International Journal of Health Care Quality Assurance* (2017). [DOI: 10.1108/IJHCQA-12-2015-0144](https://doi.org/10.1108/IJHCQA-12-2015-0144)

Provided by Queen's University

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