



REVIEW PAPER

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Influence of feedback mechanism on health care services in health care setting and barriers to their use in Pakistan

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Abstract

Healthcare settings in resource limited countries like Pakistan needs to be improved in services and all means, for that quality improvement tools are must to be implemented. It is the demand of time that constant measures should be taken for the upgradation of our healthcare system. For this purpose, feedback mechanism is an essential tool which has to be applied at all levels to get better results and patient centric delivery of services. Patient opinions have always been an integral part for the betterment of services as it will help in enhancement of the facilities according to the requirement and will of patients. In the developed countries, feedback system as the tool for quality improvement is being used since long times and it has positive effects on the impact of healthcare system there (Clancy, 2008). Therefore, we can use feedback system from patients to the hospital professionals and with that also can introduce 360 feedback mechanism for better effect. The concept of feedback needs to be willingly encompassed and cheered by clinical leadership and other participants and it will definitely bring about a change. Pakistan taken as resource poor country this QI initiative would have of great help in improving the facility for both patients and employees.

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Introduction

Quality of care is defined as the point to which the possibility of attaining the predictable health outcomes is improved and in streak with rationalized professional understanding and skills. It also is a vital component for the achievement of high efficiency and productivity levels within healthcare organizations (Sfantou *et al.*, 2017). The satisfaction of patients with health care services is a multi-phase concept with an aspect that is connected to the main attributes of services and providers. The Provision of services should be in accordance with the demands and requirements of patients because the primary focus of any medical service delivery setup are patients (Naidu, 2009).

The feedback of patient is considered essential to quality improvement and professional development. It designed to guide behavior change and facilitate reflective practice is increasingly incorporated into medical education including continuing professional development and regulatory initiatives (Baines *et al.*, 2018). Feedback is surrounded with education, daily professional activities and training. It is a valuable tool for representing whether things are going in the right direction or whether redirection is required.

In the world of healthcare professionals, the aim is to provide doctors with evidence about their practice through the eyes of their peers. Feedback is a valued tool for doctors to collect information, merge their awareness of strengths and weaknesses, and objects to maintain effective behavior (Hardavella *et al.*, 2017). Development of newer tools and techniques to assess patient opinion is an emerging trend around the globe This trend, however, has still not picked up in developing countries like Pakistan, where most of the 'patient satisfaction studies' still focus on specific areas such as the emergency department , day care surgery or family medicine sections of the hospital (Imam *et al.*, 2007a).

The healthcare sector of Pakistan is a perfect example of resource poor setting and is undergoing some modifications, and the application of service quality concepts to health care has a marvelous scope

(Naseem *et al.*, 2014). We need to develop a better patient centric approach to provide better services and improve the overall quality of our healthcare system. This study aims at finding out the feedback mechanism as quality improvement approach and the barriers in its application in Pakistan.

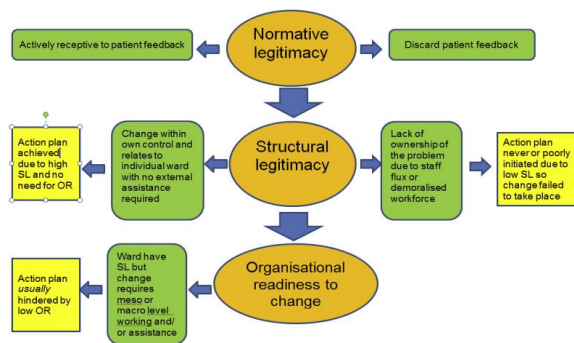
A QI Solution

Quality has multidimensional outlooks. It is an ongoing and dynamic process. For a primary healthcare program it is very important to measure the quality, especially for developing countries because if we will not do quality assessment, our resources will not be utilized efficiently and people may divert to curative services. Thus, in developing countries where healthcare system needs to augment resources for bigger population treatment and gauge up the care, quality tools can help in using the resources in right direction (Clancy, 2008). We can use feedback system from patients to the hospital professionals and with that also can introduce 360 feedback mechanism which is a process in which employees receive feedback totally anonymous from the fellow peers and colleagues.

Rationale

Effective feedback mechanism should be an integral part of every health care facility. it is a basic quality improvement tool which has been using in developed countries since long giving promising results. Some early experiments found that feedback improved performance for some indicators and impaired performance for others while increased learning and motivation. This especially narrates to understand the relationship between various team members of an organisation from different departments who work together for one agenda like improving thye experience of patients (Sheard *et al.*, 2017).

Feedback questionnaire should be developed according to standards and should be filled by the patient and with that suggestion boxes has its own importance. Suggestion boxes should be available in hospital at such places that patients can easily see them and can make use of them.



(Sheard *et al.*, 2017)

Once the feedback has been provided by the patients, their duty has been fulfilled, now the ball is in the court of health care facility. There should be a framework how the staff and employees of hospital facility take that feedback seriously and positively, how they are responding to the feedback by the patients and their fellow peers. They have to work upon all the lacunas that has been pointed out by the patients and should try to make things better.



(Google search)

This is a picture of one of the government hospitals of Pakistan which shows so many patients in the queue which shows the overburdened work due to which they are unable to put attention towards the quality improvement and at the same time feedback as a QI tool would have helped.

Barriers in Implementing Feedback Mechanism As QI Solution

The key of every organization lies in good leadership. Many believers of quality improvement (QI) advise that the link between the leadership of organization, its commitment and the capability to implement a QI initiative (Parker *et al.*, 1999). As long as leadership is strong and consistent, the outcomes will always be

positive. However there are a number of factors that can affect the quality improvement and are thought to be barriers which include, poor analysis of data, poor reward system and recognition, and corrective culture. Studies proved that leaders are often refused to be confronted by their subordinates and do not want to give them ownership and power. That is why the style of leadership could be the utmost barrier in QI (Kurji *et al.*, 2015). Lack of education and training of employees' is the biggest barrier in the implantation of any change. Every employee needs to learn about feedback mechanism underlining moralities of QI. For instance, when there is no awareness in staff about how much the feedback system is going to help the facility in improving quality, they will not be willing for the change and will easily be scorched (Antón *et al.*, 2007)

Discussion

Health issues are needed to be addressed globally that surpass national boundaries, necessitate global collaboration to address effectually, and includes multiple disciplines (Collins *et al.*, 2013). There are various quality improvement tools which are being used worldwide to make their healthcare sector better day by day. However, during the implementation of those quality improvement tools there are certain parameters which have to be looked upon such as, there is a great role of Successful leadership which depends on building a structural system and the trend of working as a team (Laohavichien *et al.*, 2009). A study done by Kraaifontein healthcare shared barriers faced during the implementation of QI which includes lack of active involvement of senior management, inconsistency of stakeholders lack of communication between management and employees, rigid organizational structure etc., which causes hindrances in empowerment of employees. Leadership styles can be important barriers in the implementation of QI (Kurji *et al.*, 2015).

It is further established by the literature that the style of leadership has great impact and transformational leaders act as motivation to bring about change and reach the target of organization. A study conducted in Germany reveals that public reporting is the most

aspiring project at present is the development of a broad quality management system in hospitals at national level (Breckenkamp *et al.*, 2007).

Feedback mechanism is one such QI tool which has been successfully implemented in many countries globally. According to the various studies, the most important component for the development of health care facilities and practitioners is the feedback mechanism, it greatly helps the clinical performance of physicians. It is a major element at all stages of the career for the doctors and staff for the development of confidence and competence. (Kaye *et al.*, 2014). Since many years there is a realization of the basic need to take into account the feedback and opinions of patients of their hospital experiences so that the healthcare provided to them could be improved and reflects what patients want (Imam *et al.*, 2007b).

Effective feedback is also a way to learn from own mistakes and failures in a system. Studies in UK showed that the information regarding hospitals' own weaknesses could be used in a better way to improve the quality and level of services (Benn *et al.*, 2009). However, the concept of patient safety is global, according to literature there is still a gap of regulatory system for the control of medical mishaps in India (Rajalatchumi *et al.*, 2018). Also there is a survey conducted to find out the mechanism of providing feedback of the patients about safety care which showed that participants recognized safety feedback mechanisms should be concise, summarizing with clear instructions to complete the form, it should also be patient-centred with an option to be unnamed and balanced between (safe) positive and (unsafe) negative experiences (Scott *et al.*, 2016).

Another systemic study pointed out the barriers present in the healthcare system to quality improvement which include the culture of no change along with the Disbelief amongst staff about the inevitability of the proposed change (Bastemeijer *et al.*, 2019). All these studies proves that feedback mechanism has been in use all over the world and refining the quality of healthcare services.

As far as Pakistan is concerned, it is a resource limited country, our healthcare sector is not well developed due to limited budget allocation to the health sector and the inability of many patients to afford expensive treatment modalities. Nevertheless, we should make an effort to improve the quality through the means which are easy to apply and cost effective too. Feedback mechanism can greatly help the healthcare settings in Pakistan to enhance the services quality keeping it more patient ideal but In Pakistan the healthcare professionals and the healthcare facilities are so far not in favor of accountability. There is also no much data available about the use of feedback mechanism for quality improvement in healthcare. Ideally if the medical profession and healthcare facilities could adopt some system of self-monitoring wherein the professional specialty organizations can play a vital role, it will be better as the feedback system has been used as a efficacious instrument (Jawaid, 2015). Another study done in Pakistan showed that there is insignificant relationship between doctor-patient communication and patient satisfaction due to gap present in between both of them (Hussain *et al.*, 2019).

Conclusion

However, the concept of feedback is new but it is high time that it needs to be willingly incorporated and cheered by clinical leadership and other participants as it a powerful quality improvement tool and will definitely bring about a change. Pakistan taken as resource poor country this QI initiative would have of great help in improving the healthcare facility for both patients and employees.

Recommendations

In Pakistan it's high time to introduce the feedback mechanism on national level in all healthcare facilities in order to make the hospitals patient central and for their satisfaction. An action plan has to be made for assessing the healthcare services provided to the people for which the evaluation process should be formative and with that strong emphasis on evidence-based quality health care is the need of the hour. Also that there is a wide knowledge as well as research gap is present which has to be worked upon.

References

- Antón P, Peiró S, Aranaz JM, Calpena R, Compañ A, Leutscher E, Ruíz V.** 2007. Effectiveness Of A Physician-Oriented Feedback Intervention On Inappropriate Hospital Stays. *Journal Of Epidemiology & Community Health* **61**, 128-134.
- Baines R, De Bere SR, Stevens S, Read J, Marshall M, Lalani M, Bryce M, Archer J.** 2018. The Impact Of Patient Feedback On The Medical Performance Of Qualified Doctors: A Systematic Review. *Bmc Medical Education* **18**, 173.
- Bastemeijer CM, Boosman H, Van Ewijk H, Verweij LM, Voogt L, Hazelzet JA.** 2019. Patient Experiences: A Systematic Review Of Quality Improvement Interventions In A Hospital Setting. *Patient Related Outcome Measures* **10**, 157.
- Benn J, Koutantji M, Wallace L, Spurgeon P, Rejman M, Healey A, Vincent C.** 2009. Feedback From Incident Reporting: Information And Action To Improve Patient Safety. *Bmj Quality & Safety* **18**, 11-21.
- Breckenkamp J, Wiskow C, Laaser U.** 2007. Progress On Quality Management In The German Health System—A Long And Winding Road. *Health Research Policy And Systems* **5**, 7.
- Clancy CM.** 2008. How Patient-Centered Healthcare Can Improve Quality. *Patient Safety & Quality Healthcare* **5**, 6-7.
- Collins PY, Insel TR, Chockalingam A, Daar A, Maddox YT.** 2013. Grand Challenges In Global Mental Health: Integration In Research, Policy, And Practice. *Plos Med* **10**, E1001434.
- Hardavella G, Aamli-Gaagnat A, Saad N, Rousalova I, Sreter KB.** 2017. How To Give And Receive Feedback Effectively. *Breathe* **13**, 327-333.
- Hussain A, Sial MS, Usman SM, Hwang J, Jiang Y, Shafiq A.** 2019. What Factors Affect Patient Satisfaction In Public Sector Hospitals: Evidence From An Emerging Economy. *International Journal Of Environmental Research And Public Health* **16**, 994.
- Imam SZ, Syed KS, Ali SA, Ali SU, Fatima K, Gill M, Hassan MO, Hashmi SH, Siddiqi MT, Khan HM.** 2007a. Patients' Satisfaction And Opinions Of Their Experiences During Admission In A Tertiary Care Hospital In Pakistan—A Cross Sectional Study. *Bmc Health Services Research* **7**, 161.
- Imam SZ, Syed KS, Ali SA, Ali SU, Fatima K, Gill M, Hassan MO, Hashmi SH, Siddiqi MT, Khan HM.** 2007b. Patients' Satisfaction And Opinions Of Their Experiences During Admission In A Tertiary Care Hospital In Pakistan—A Cross Sectional Study. *Bmc Health Services Research* **7**, 1-8.
- Jawaid SA.** 2015. Patient Satisfaction, Patient Safety And Increasing Violence Against Healthcare Professionals. *Pakistan Journal Of Medical Sciences* **31**, 1.
- Kaye AD, Okanlawon OJ, Urman RD.** 2014. Clinical Performance Feedback And Quality Improvement Opportunities For Perioperative Physicians. *Advances In Medical Education And Practice* **5**, 115.
- Kurji Z, Shaheen ZZSP, Mithani Y.** 2015. Review And Analysis Of Quality Healthcare System Enhancement In Developing Countries. *Jpma. The Journal Of The Pakistan Medical Association* **65**, 776.
- Laohavichien T, Fredendall LD, Cantrell RS.** 2009. The Effects Of Transformational And Transactional Leadership On Quality Improvement. *Quality Management Journal* **16**, 7-24.
- Naidu A.** 2009. Factors Affecting Patient Satisfaction And Healthcare Quality. *International Journal Of Health Care Quality Assurance*.
- Naseem A, Rashid A, Kureshi NI.** 2014. E-Health: Effect On Health System Efficiency Of Pakistan. *Annals Of Saudi Medicine* **34**, 59-64.
- Parker VA, Wubbenhorst WH, Young GJ, Desai KR, Charns MP.** 1999. Implementing Quality Improvement In Hospitals: The Role Of Leadership And Culture. *American Journal Of Medical Quality* **14**, 64-69.

Rajalatchumi A, Ravikumar TS, Muruganandham K, Thulasingham M, Selvaraj K, Reddy MM, Jayaraman B. 2018. Perception Of Patient Safety Culture Among Health-Care Providers In A Tertiary Care Hospital, South India. *Journal Of Natural Science, Biology, And Medicine* **9**, 14.

Scott J, Heavey E, Waring J, Jones D, Dawson P. 2016. Healthcare Professional And Patient Codesign And Validation Of A Mechanism For Service Users To Feedback Patient Safety Experiences Following A Care Transfer: A Qualitative Study. *Bmj Open* **6**, E011222.

Sfantou DF, Laliotis A, Patelarou AE, Sifaki-Pistolla D, Matalliotakis M, Patelarou E. Importance Of Leadership Style Towards Quality Of Care Measures In Healthcare Settings: A Systematic Review. *Healthcare*, 2017. Multidisciplinary Digital Publishing Institute 73.

Sheard L, Marsh C, O'hara J, Armitage G, Wright J, Lawton R. 2017. The Patient Feedback Response Framework–Understanding Why Uk Hospital Staff Find It Difficult To Make Improvements Based On Patient Feedback: A Qualitative Study. *Social Science & Medicine* **178**, 19-27.