

Healthcare Quality Facilities Digitalization in India

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Introduction

The public's trust in health care is being shaken by worsening quality indices. Although hospital safety and quality of care can be enhanced, healthcare quality remains a hazy idea and operational reality. As a result, the goal of this study is to define the term "healthcare quality." The foundation was provided by Walker and Avant's idea analysis method, which is the most often utilised in nursing literature. We used general and medical dictionaries, public domain websites, and five academic literature databases to conduct our research. Health care and quality, as well as healthcare and quality, were used as search phrases. From 2004 to 2016, peer-reviewed articles and government documents published in English were included. Related concepts, talks about the need for quality care, grey literature, and conference proceedings were all ruled out. During the analysis, similar attributes were classified into themes. After removing duplicates and those that did not match the eligibility criteria, 42 relevant articles were evaluated. Four distinguishing criteria were discovered after thematic analysis: (1) effective, (2) safe, (3) culture of excellence, and (4) desired outcomes [1].

Description

The assessment and provision of effective and safe care, represented in a culture of excellence, resulting in the realisation of optimal or desired health, is the definition of healthcare quality based on these traits. This study provides a definition of healthcare quality that includes inferred core components and has the potential to improve the delivery of high-quality treatment. Theoretical and practical implications given support a more complete and consistent knowledge of the components required to improve healthcare delivery and maintain public trust. The dependent variable was the amount of coordination of care for women and children, while the independent variable was the quality of healthcare for women and children. Shelters are a valuable resource for promoting crucial health and safety in catastrophes around the world, especially for vulnerable populations (e.g., children, elderly, chronically ill). The type and quality of healthcare services provided in disaster and emergency shelters are investigated in this study. In disaster and emergency shelters, an integrated review of English-language literature relevant to the assessment, evaluation, and systematic measurement of healthcare quality and client outcomes was conducted. Although there are a few population-based and smaller, ad hoc outcomes-based evaluation studies, the literature on systematic outcomes-based quality assessment of disaster sheltering healthcare services is noticeably lacking. The statutory health insurance system prioritises ensuring the quality of healthcare services. This article discusses how the usage of various digital solutions connects to the traditional goals of quality assurance in healthcare, and whether digital technologies are appropriate for advancing quality assurance. It has been demonstrated that

digital solutions are fundamentally suitable for quality assurance. This is due to two properties of digital solutions: the ability to collect complete data and the ability to make data available at any time and in any location. However, it is clear that the advantages of digital solutions are greatly reliant on the use cases in question [2-5].

Conclusion

The structural quality of healthcare facilities was predicted using logistic regression. The findings imply that having all standard resources available at health care facilities in India is difficult. Surprisingly, having a drinking water source within a health care facility appears to be a signal of poor structural quality. The lack of a separate exam room and a sink to wash hands is linked to having a water supply inside a health care institution. A greater registration cost was linked to better structural quality, as well as having a separate exam room and a sink for hand washing. Originality/value This study demonstrates how difficult it is to provide effective health care to the poor, especially in developing countries. To improve the population's health, more research on the quality of healthcare services in India is required. Little research has been done on the factors influencing the structural quality of the healthcare facilities in India. This research adds to our understanding of the current state of structural healthcare facility standards and their influences in India.

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Conflict of Interest

The authors declare that there is no conflict of interest associated with this manuscript.

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