#### EDITORIAL VIEW



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# Modern challenges of patient care in healthcare system

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#### ABSTRACT

Provision of healthcare has been rapidly evolving into a scientific system of diagnosis and provision of evidence based appropriate treatment. The old quotation – "around the patient, revolves our universe", has never been so true, with rising literacy rate and the cheap and easy access to the internet has bridged many a gaps. On one hand, the treating physicians can access the latest knowledge, and share the information about a particular patient with their colleagues sitting thousands miles apart; on the other the patient has equivalent access to many health related websites and social media groups, where to seek opinions about the options of treatment of their suspected disease. The modern era of the medicine has started stressing close doctor-patient relationship, the patients' right to know and participate in decision making and his right to choose. Much strides have been made in the patient safety and improving the quality of the care being provided to the patients.

Key words: Healthcare; Expectations; Managed care; Feedback; Quality Management/ standards

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The healthcare system aims to improve patient care and satisfaction with available resources with patients' involvement.<sup>1</sup> Healthcare infrastructure is built to deliver best of the health services. At present all emphasis seems to be upon the medical aspect of patients, with little focus on non-medical aspects of the healthcare system. How do patients expect to be cared and involved in their treatment? What are the best ways to make patients comfortable in health institutions? How healthcare professionals can be motivated and involved to improve the delivery of health services? What are the community concerns? How can social issues be solved along with providing best medical treatment?

Involvement of patients and families in healthcare can result in better understanding and improved health outcomes.<sup>2</sup> This mutual cooperation is beneficial in selecting treatment options and facilitates good health management results. Good doctor-patient relationship is a key factor in this chain.<sup>3</sup> Proper training and orientation of medical staff can improve patient care.<sup>4</sup> Time constraints and heavy workload are big barriers in this chain of care.<sup>5</sup> Increased patient expectations is also a growing problem all over the world.<sup>6</sup> Now patients expect to be involved in all health issues and expect to be explained about each and every thing of their disease, course of treatment, recovery and post cure precautions. Any gap between health professionals and patients results in dissatisfaction and turns out into complaints and litigations.<sup>7</sup>

#### **Patient self-care:**

The concept of paternalism in medical field has remained dominant and the patients are told to follow the instructions as told by their practitioners. Whether the patient likes it or not, he has to follow the doctor's orders as the doctors know better. But now the debate is alive to bring a change into this traditional patient care system. There is a growing trend towards patient self-care. Culture of patient self-care can be promoted through medical staff training and public awareness.<sup>8</sup> Sense of involvement as a partner in healthcare can play a key role in happy partnership between doctors and patients.<sup>9</sup> Social, electronic and print media can play important role in

# modern challenges of patient care

creating awareness about health related self-decisions in collaboration with health professionals.<sup>10</sup> Patients involved in self-care can have the opportunity to make a selection of medical intervention with less risks and which is optimum to their expectations. It also helps the medical care providers to get a better response from the patients and families.

## Patient access to medical record:

Medical record is confidential and there is a strict process in every healthcare organization has an elaborate system to maintain its confidentiality. As the record belongs to patients, so now there is a move all over the world to allow patient access to it. Patients want to know what is going on with their health and how they are being treated. Involvement of patients in their care can improve their satisfaction and this can be achieved by providing easy access of medical record to patients.<sup>11</sup> It can improve their trust and can reduce medical errors.

But medical writings and terminologies are very specific to medical personnel and very difficult for a non-medical person to understand. It seems that a lack of full understanding may create more confusions. Do we need to develop a process to make medical records easier to understand by the patients and common man?<sup>12</sup> Best way to do it is to make all the medical record electronic. Medical professionals or medical transcriptors can convert complicated medical writing to easily readable medical notes. A restricted electronic access can be given to patients and they can read and understand about their electronic medical file.

#### Involving patients in decision making:

It is a demand of the present time good health practice that doctors involve patients and families in decision making process. Evidence based discussion about the disease, possible causes, best treatment options, duration of treatment, expected recovery time, precautions and preventions, can help patients and families in their decision making ability and it improves patient's satisfaction.<sup>13</sup> Many online medical forums and platforms help patients and families to know about different diseases and best possible treatment options available to them. Studies have documented a lack of understanding by the doctors about the patients preferences in decision making.14,15 Majority of literate patients now collect information about their disease, before or after visiting doctors. There are internet discussion forums which freely discuss patients concerns and experiences. It promotes patient understanding and helps doctors, as patients already have a knowledge about disease and are mentally prepared for its treatment options. But still the process of mutual decision making is not optimum.<sup>16</sup> Improving communication can deliver good health outcomes and better patient's satisfaction.

## **Delivering quality healthcare:**

Good quality health services are backbone of a healthy community. Key performance indicators can be utilized to monitor improvement or otherwise.<sup>17</sup> It needs continuous effort and a nice teamwork. All participants must be at the same page and everyone must strive for good results. A reward system can be placed in practice that can encourage and promote services.<sup>18</sup> Better education, training and motivation ensure good quality work. Areas of improvement can be identified and the ways to improve output need to be discussed. Patient feedback system can facilitate changes. A sustained effort and teamwork and feedback system can bring about the desired improvement. All stakeholders, from top leadership to the lowest degree healthcare worker, shall be involved in the process, to fulfil their roles and responsibilities with professional competence and only then the required target of healthcare excellence can be achieved.

## Improving patient safety:

Patient safety culture is of an immense importance. Its negative outcome has critical impact on healthcare institutions. There are many safety tools adapted by the healthcare institutions to ensure patient safety and prevent medical errors. Different safety checks in the course of healthcare provision can be followed and practiced. Involvement of patients in their treatment like procedural consent, laboratory sample taking, administration of medications, can also prevent possible medical errors.<sup>19</sup> If any incidence of a medical error does happen, a process to report it shall be followed. Patients are counselled and reassured about the possible happening and the event. All possible measures may be undertaken to prevent any further happening of such incident. A positive staff feedback system and periodic staff evaluations ensures the continuity of quality health delivery system.

# CONCLUSION

The growing challenges of patient care in medical institutions and organizations need special focus on patients' concerns and needs. All possible measures should be undertaken to ensure patient involvement in the healthcare process. Safety of patients and good quality teamwork are essential key factors required for best patient and families satisfaction and excellent health outcomes.

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#### REFERENCES

- Greenfield G. GPs should be rewarded for patient experience to encourage a person centred NHS. BMJ 2014;349:g6422
- Coulter A, Locock L, Ziebland S, Calabrese J. Collecting data on patient experience is not enough: they must be used. BMJ 2014;348:g2225
- Hart JT. Expectations of health care: promoted, managed or shared? Health Expect 1998;1:3-13. [PubMed] [Free full text] doi: 10.1046/j.1369-6513.1998.00001.x
- Elwyn G, Edwards A, Kinnersley P, Grol R. Shared decision making and the concept of equipoise: the competences of involving patients in healthcare choices. Br J Gen Pract 2000;50:892-97 [PubMed] [Free full text]
- Brown J, Stewart M, Tessier S. Assessing communication between patients and doctors: a manual for scoring patient-centred communication. London: Thames Valley Family Practice Research Unit, 1995 (Working paper series 95-2).
- Donelan K, Blendon RJ, Schoen C, Binns K, Osborn R, Davis K. The elderly in five nations: the importance

of universal coverage. Health Aff (Millwood) 2000;19:226-35 [<u>PubMed]</u>

- Vincent C, Young M, Phillipis A. Why do people sue doctors? A study of patients and relatives taking legal actions. Lancet 1994;343:1609-13.
- 8. Frosh D. The patient is the most important member of the team. BMJ 2015;350:g7767
- Stewart M. Effective physicianpatient communication and health outcomes: a review. Can Med Assoc J 1995;152:1423-33.
- Pyper C, Amery J, Watson M, Crook C, Thomas B. ERDIP online patient accès project. Oxford: Bury Knowledge Health Centre and Department of Public Health, University of Oxford. 2001. [Google Scholar]
- Walker J, Meltsner M, Delbanco T. US experience with doctors and patients sharing clinical notes. BMJ 2015;350:g7785
- 12. Montori V, Tabini CC. Opening access to the medical record calls for other reforms. BMJ 2015;350:h271
- Stacey D, Légaré F, Lewis K, Barry MJ, Bennett CL, Eden KB, et al. Decision aids for people facing health

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treatment or screening decisions. Cochrane Database Syst Rev 2014;1:CD001431. [PubMed] doi: 10.1002/14651858.CD001431.pub5. Review.

- Cockburn J, Pit S. Prescribing behaviour in clinical practice: patients's expectations and doctors's perceptions of patients's expectations. BMJ 1997;315:520-23
- 15. Mullen PD. Compliance becomes concordance. BMJ 1997;314:691.
- Makoul G, Arntson P, Schofield T. Health promotion in primary care: physician-patient communication and decision-making about prescription medications. Soc Sci Med 1995;41:1241-54.
- Marshall MN, Shekelle PG, Leatherman S, Brook RH. The public release of performance data: what do we expect to gain? A review of the evidence. JAMA 2000;284(14):1866-74 [PubMed] doi:10.1001/jama.283.14.1866
- 18. Secretary of State for Health. The NHS plan. London: Stationery Office, 2000.
- 19. Dean B, Barber N, Schachter M. What is a prescribing error? Q Health Care 2000;9:232-37.