

Striking the Balance between Efficiency and Quality of Care

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Strategic Leadership in Healthcare Delivery

The article by Aaron Cummins illustrates the application of strategic leadership skills in the endeavor to balance the provision of quality healthcare and, at the same time, achieve efficient financial management. The nature of services delivered to patients should not be compromised by the urge to improve financial accumulation in health facilities. Clients' well-being should be the priority of every official in the healthcare unit. The author suggests that by providing the best services and ensuring the satisfaction of the customers, efficiency in financial management automatically takes effect (Striking, 2018). It is the obligation of the leaders in these institutions to make the best ethical decisions and provide the most effective strategies that are focused on achieving the primary goals in the quest to accomplish the set secondary objectives. Iteratively, the author, currently a finance and performance director at Mid Staffordshire, relates how they were able to achieve their set target at Liverpool Heart and Chest Foundation Trust (LHCFT) of increasing the annual financial savings from 3 to 4 million Euros by enhancing quality healthcare. Despite the urge to augment the savings from the set budget, the concerned officials were not distracted from their primary responsibilities to their patients. Among the achievements included an improvement in clients' satisfaction and reduced infection and mortality rates. Although the author does not provide supporting details or data, it is most likely that the accomplishment of the secondary target was significantly influenced by the reduction in the costs utilized in delivering quality care to the patients. For instance, patient turnout was low because of the decline in infection rates, implying that extra resources were saved for future use.

Financial Efficiency and Quality Priorities

At Mid Staffordshire, the officials anticipate recording a consistent saving rate of 5% to 6% annually, but this has to be accomplished after the provision of quality healthcare to the patients. It is one thing to balance efficiency and standardized care, but it is a different matter to select which of the two should be given priority over the other. It would be unreasonable if the officials at the hospital decided to save costs and then improve the conditions afterward because it is possible to achieve neither of them. Giving efficiency priority suggests that clinicians are not concerned with patients' satisfaction, and this might result in a change of preferences. The latter might opt to seek assistance from another service provider, and this reduces the chances of the accomplishment of any of the set targets, both primary and secondary goals. However, by prioritizing quality care and achieving

significant positive outcomes, the savings rate of 5-6 percent can be met because of reduced costs and increased income.

Measuring Costs and Improving Patient Care

Efficiency and quality care can be balanced by identifying and evaluating the causes of the instabilities and creating relevant insights through ethical decision-making. In the article, the author reflects on a system introduced at LHCFT to measure and analyze the cost of care each patient incurred to establish whether the two aspects were balanced or not (Striking, 2018). The review entails a thoracic surgeon who, through the system, was able to identify a way of saving an extra 400 Euros and providing quality care as before. From this incident, it is evident that an imbalance between efficiency and quality care in health institutions can unconsciously be unnoticed until individual components are introduced to measure and compare the situation with a different issue that is perfect (Ma, 1994). It is not guaranteed that a leader or health official at the hospital must balance efficiency in financial management and provision of quality services because one might lack the knowledge and experience to identify or notice the problematic issue involved. The creation of the best and most relevant tools to measure the cause of the imbalances significantly aids in aligning the practices to adopt a system where efficiency and quality care are balanced.

Evaluation of the Author's Evidence

The author has tried as much as possible to support his arguments regarding the significance of balancing efficiency and quality of health services by providing factual information. It can be unreasonable to doubt the performance of the officials at the LHCFT institution, where they were able to stabilize financial management and adhere to the client's demands because the author has incorporated several details that indicate the hospital's excellence. In six consecutive years, it won various awards for its performance in balancing patients' satisfaction and financial outcomes. It is an indication that the institution is pervasively recognized for its ability to balance productivity and profitability. Additionally, the inclusion of factual figures to support arguments, such as the time taken, which is 18 years, to realize excellence at LHCFT, implies that the author has utilized evidence to strengthen his claims. Therefore, the facts are undoubtedly accurate, and the article has sufficiently included solid evidence where necessary to avoid unnecessary questions from his audience. Furthermore, these factual figures and data significantly affirm my stand that financial management efficiency consistently trails the provision of quality services to patients at the health institution. It is easier to save when the clients are satisfied than when multiple issues require financial attention.

References

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