

**QUALITY ASSESSMENT OF HEALTH CARE SERVICES FOR
DIABETIC PATIENTS (TYPE II) IN OUTPATIENT CLINICS AT
MISR UNIVERSITY FOR SCIENCES AND TECHNOLOGY HOSPITAL**

Thesis

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List of Abbreviations

ADA	American Diabetes Association
AHRQ	Agency for Health Care Research and Quality
BP	Blood Pressure
CHWs	Community Health Workers
CME	Continuing Medical Education
DCCT	Diabetes Control and Complications Trial
DH	Department of Health
DM	Diabetes Mellitus
GHb	Glycated Hemoglobin
HbA_{1c}	Glycosylated Hemoglobin
HEDIS	Health Employer Data and Information Set
HMO	Health Maintenance Organization
JCAHO	Joint Commission on Accreditation of Hospital Organization
MUST	Misr University for Sciences and Technology
NACHQ	National Association for Health Care Quality
NHQR	National Health Care Quality and Research

PDSA	Plan-Do-Study-Act
PHC	Primary Health Care
QI	Quality Improvement
TQM	Total Quality Management
UKPDS	United Kingdom Prospective Diabetes Study
US	United States
WHO	World Health Organization

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Abstract

Background: Diabetes mellitus is a chronic disease caused by inherited and/or acquired deficiency in production of insulin by the pancreas or by the ineffectiveness of the insulin produced. Such a deficiency results in increased concentration of glucose in the blood, which in turn damage many of body systems in particular the blood vessels and nerves. To avoid diabetes complications improve the quality of health services introduced to diabetics and teach the health providers the standards of care for diabetics. Meeting customer's need and expectations is a useful definition for quality. Well-designed services create customer satisfaction because they provide the features or characteristics that customer's need.

Objective: To improve the quality of health care services provided to diabetic patients attending outpatient clinic in Misr University Hospital.

Methods: The study was conducted on the diabetic patients attended to outpatient clinics in Misr University Hospital in 6th October governorate, during the period from April 2010 to May 2011, analytic cross sectional-interventional study was conducted to measure the level of patients and doctors satisfaction with the health care services in outpatient clinic. Tools of the study was interview questionnaire, self administered questionnaire and direct observation checklist, sampling was all patients attended to the clinic in this duration which 400 patient and all doctors provides health care service in outpatient clinic which was 15 doctor.

Results: Most of the studied participants were in the age group less than 50 years. Males represent 60.8% of the studied candidates, while females represent 39.2%. As regard marital status 26.5% of the samples were married. Results shows that old age group and unemployed group are more satisfied with outpatient clinic more than other groups with highly statistically significant difference, also old age group and farmers are more satisfied about nursing services than other group. Also, females and farmers are more satisfied with doctors' services than other groups.

Conclusions: Certain service aspects need improvement to make the patients and doctors more satisfied.

Recommendations: Increase manpower, materials and money resources of the clinic. Work as a team and sharing doctors in decision making. Continuous orientation sessions for doctors about the updated guidelines of diabetes care. Health education programs for patients.

Keywords: Quality of health care – Diabetes care services.

INTRODUCTION

Diabetes mellitus is a chronic disease caused by inherited and/or acquired deficiency in production of insulin by the pancreas or by the ineffectiveness of the insulin produced. Such a deficiency results in increased concentration of glucose in the blood, which in turn damage many of body systems in particular the blood vessels and nerves (*WHO, 2002*).

Diabetes mellitus (DM) became one of the most important public health challenges for the 21st century due to its chronic nature and sever complications. Over 150 million adults are affected by DM worldwide, and this number is expected to double in the next 25yrs (*Renders, 2001; Diabetes Quality Improvement Project, 2002*).

Recently data show that approximately 230 million people have diabetes mellitus worldwide and this number may will double by the year 2025 (*WHO, 2009*).

The rate of increase in diabetes incidence has become dramatically higher in developing countries, between 1995 and 2025, the number of individuals with diabetes is expected to increase by 170% in the

developing world, compared with 42% in developed nations (*Renders, 2001*).

In Egypt the number of diabetics is predicted to be 6 million and prevalence rate is 7.2% (>20yrs old). This may be due to population growth and aging, unhealthy diets, obesity and sedentary lifestyles (*WHO, 2011*).

The expected epidemic of diabetes will be paralleled by a marked increase in the incidence of its chronic complications responsible for the huge premature morbidity and mortality associated with the disease.

Diabetes is the leading cause of blindness in industrialized countries, and it represents the most frequent cause of visual handicap in people aged <60 years. Diabetes mellitus is considered a problem because its complications have a significant economic impact on individuals, families, health systems and countries (*Zimmet et al., 2001*).

Complications divided into macrovascular (ischemic heart diseases, peripheral vascular and cerebrovascular diseases) and microvascular (nephropathy and retinopathy). Prevalence of vascular