Editorial

Patient satisfaction in substance abuse institutions as indicator for successful implementation of total quality management

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ABSTRACT:

Total quality management (TQM) is a management approach of an organization centered on quality, based on the participation of all its members and aiming at long term success through customer satisfaction and benefits to all members of the organization and society. Nowadays, there is a growing interest in TQM in healthcare facilities. Patient satisfaction is an essential and normally utilized marker for estimating the quality in health care. Patient satisfaction influences clinical results, patient retention and medical negligence claims. It affects the auspicious, proficient and patientcentred conveyance of quality health care. Little is currently known about patients??? Satisfaction with different domains of substance abuse treatment. Few studies have investigated the aspects of patient satisfaction associated with patients??? Perceived treatment outcome. This presentation illustrates the importance of patient satisfaction of substance abuse clients as indicator of TQM in healthcare institutions based on a systematic review of literature, with focus on financial and clinical significance of patient overall satisfaction with treatment, taking in consideration the main variables and limitations in assessing the satisfaction of substance abuse client such as management and organizational factors, client factors, baseline drug use, treatment duration (length of stay), treatment type and many other factors.

Services for the prevention and treatment of substance misuse and substance use disorders have traditionally been delivered separately from other mental health and general health care services. Because substance misuse has traditionally been seen as a social or criminal problem, prevention services were not typically considered a responsibility of health care systems; and people needing care for substance use disorders have had access to only a limited range of treatment options that were generally not covered by insurance. Effective integration of prevention, treatment, and

recovery services across health care systems is key to addressing substance misuse and its consequences and it represents the most promising way to improve access to and quality of treatment. Recent health care reform laws, as well as a wide range of other trends in the health care landscape, are facilitating greater integration to better serve individual and public health, reduce health disparities, and reduce costs to society.

The Centers for Disease Control and Prevention (CDC) summarizes strength of evidence as: "Well-supported": when evidence is derived from multiple controlled trials or large-scale population studies; "Supported": when evidence is derived from rigorous but fewer or smaller trials; and "Promising": when evidence is derived from a practical or clinical sense and is widely practiced

It is known that most people with substance use disorders do not seek treatment on their own, many because they do not believe they need it or they are not ready for it, and others because they are not aware that treatment exists or how to access it. But individuals with substance use disorders often do access the health care system for other reasons, including acute health problems like illness, injury, or overdose, as well as chronic health conditions such as HIV/AIDS, heart disease, or depression. Thus, screening for substance misuse and substance use disorders in diverse health care settings is the first step to identifying substance use problems and engaging patients in the appropriate level of care.

Mild substance use disorders may respond to brief counselling sessions in primary care, while severe substance use disorders are often chronic conditions requiring substance use disorder treatment like specialty residential or intensive outpatient treatment as well as long-term management through primary care. A wide range of health care settings is needed to effectively meet the diverse needs of patients.

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