

# **Passing the Baton: The Role of Healthcare Organizations in Leading Continuing Education Programs in Quality Improvement and Safety**

**O. Elijah Asagbra**  
**East Carolina University**

**Susie T. Harris**  
**East Carolina University**

*Quality of care continues to be of serious concern in the United States. Part of addressing this concern must include academic programs that produce students with an appreciation of quality management to take up positions in healthcare organizations. Moreover, healthcare organizations must ensure that quality and safety are front of mind for those they employ, especially those in management. This study presents an evaluation of student perception of their readiness to work as part of quality management teams and undertake quality management activities. Majority of the students surveyed agreed that they felt well prepared to participate on a healthcare quality management (QM) team, felt confident in their ability to participate in QM activities, and were extremely confident in their QM skills. Additionally, majority of the respondent indicated that “everyone” was responsible for ensuring quality in the healthcare organization. Healthcare organizations must invest in the professional development of their employees especially in quality management. This may prove to be beneficial to their patients and bottom line.*

*Keywords: quality, quality improvement and safety, continuing education, healthcare organizations, student perception, professional development*

## **INTRODUCTION**

The state of health care quality is of serious concern in the United States (Chassin & Galvin, 1998; Institute of Medicine (US) Committee on Quality of Health Care in America & Kohn, L.T., Corrigan J.M., Donaldson, M.S., 2000; Institute of Medicine (US) Committee on Quality of Health Care in America, 2001). To address the quality and safety concerns in the healthcare system, significant resources have been invested and policies have been proposed (Tang, Eisenberg, & Meyer, 2004; Waring, Allen, Braithwaite, & Sandall, 2016). Quality improvement courses and programs have been created and included as part of the healthcare curriculum at tertiary institutions across the country to equip future healthcare professionals to meet the challenges of quality and safety in the healthcare system (Asagbra, & Harris, 2022; Ramamonjiravelo, et al., 2020; Encourage, 2012). Though undergraduate and graduate programs in healthcare management continue to develop and enhance quality improvement and management courses to ensure that healthcare management curricula, it is expected that not all students will take positions working directly in quality management. Notwithstanding, having some knowledge in quality improvement will influence how they consider their chosen positions in healthcare.

Healthcare organizations must also take up the baton of emphasizing quality management and safety to ensure that it is front of mind for those they employ, especially those in management. Studies have discussed the need to for managerial personnel of public hospitals to have a clear understanding and perception of health service quality, as it provides a basis for effective and efficient hospital management (Rybarczyk-Szwajkowska, Cichońska, & Holly, 2016). Additionally, it was determined that core competencies for healthcare quality should serve as a reference for future training (Cui et al., 2020). Healthcare organizations must therefore stand in the gap by encouraging their employees to participate and engage in continuing education on quality improvement and safety. It may not be necessary to expose every employee to specialized quality improvement tools, but it is necessary for healthcare employees to have a general appreciation of quality in the healthcare setting. Organizations can also buttress the idea that quality management is the responsibility of everyone in the organizations by stating it clearly in their mission and vision statements and by establishing frequent internal programs and activities on quality improvement and safety.

Organizations that take a conscious and purposeful approach to create programs that will continue to improve the knowledge, confidence, and competency of employees about quality improvement and safety may see benefits as well since studies have indicated a relationship between quality and hospital performance (Barnes, Oner, Ray, & Zengul, 2018; Dunton N, and Fisher A, 2021; Mercado, 2020). This study presents an evaluation of student perception of their ability to work as part of quality management teams and undertake quality management activities. The skills and abilities these students obtain from their respective universities and training programs must however be continuously honed and nurtured even as they become employees at healthcare organizations. At a minimum, refresher programs must keep employees aware of and eliminate the pitfalls associated with apathy or lack of interest in healthcare quality. If organizations and their employees can view their duties and responsibilities through the quality improvement lens, then the health system overall may benefit from it.

## **METHODS**

### **Setting, Participants and Survey Procedure**

This study was conducted during the COVID-19 era, in Spring 2021. The course in quality management in healthcare comprised of a combination of undergraduate and graduate students. The course is offered in-class (i.e., face-to-face) or online (i.e., distant education) and is typically offered to undergraduate students in their third year and to master level students in their first year. All graduate students (three males, twelve females) took the course online. Among undergraduates, sixteen students (one male, fifteen females) took the course in class and fifty-seven students (six males, fifty-one females) took the course online. Of the undergraduate students, forty-eight out of seventy-three students completed the survey. Of the graduate students, eleven out of fifteen graduate students completed the survey. Overall, a total of fifty-nine out of eighty-eight students completed the survey at the end of the semester. The survey, which was administered electronically, asked students about their ability to and confidence in participating as part of a quality management team after graduation. Student responses were collected anonymously.

### **Data Analysis**

This study utilized a quantitative approach, and all data analyses were conducted using MS Excel version 2019. The demographic characteristics of the students and their responses to survey questions are presented in the figure below. Each student was asked at the end of the course the following questions: 1) “How confident are you in your healthcare quality management skills?”; 2) “I feel well prepared to participate on a healthcare quality management (QM) team”; 3) “I feel confident in my ability to fully participate in quality management (QM) activities in healthcare?” Each student respondent could answer the first question as “little confident”, “somewhat confident”, or “extremely confident.” The second and third questions could be answered with options ranging from “strongly agree” to “strongly disagree.” An independent sample t-test was conducted to compare the responses between the undergraduate and graduate students to determine if there was a significant difference in student responses given their classification.

Secondarily, the students were asked "... who is responsible for quality in healthcare?" and the responses were collated and noted.

**FIGURE 1**  
**STUDENT RESPONSES TO SURVEY QUESTIONS**

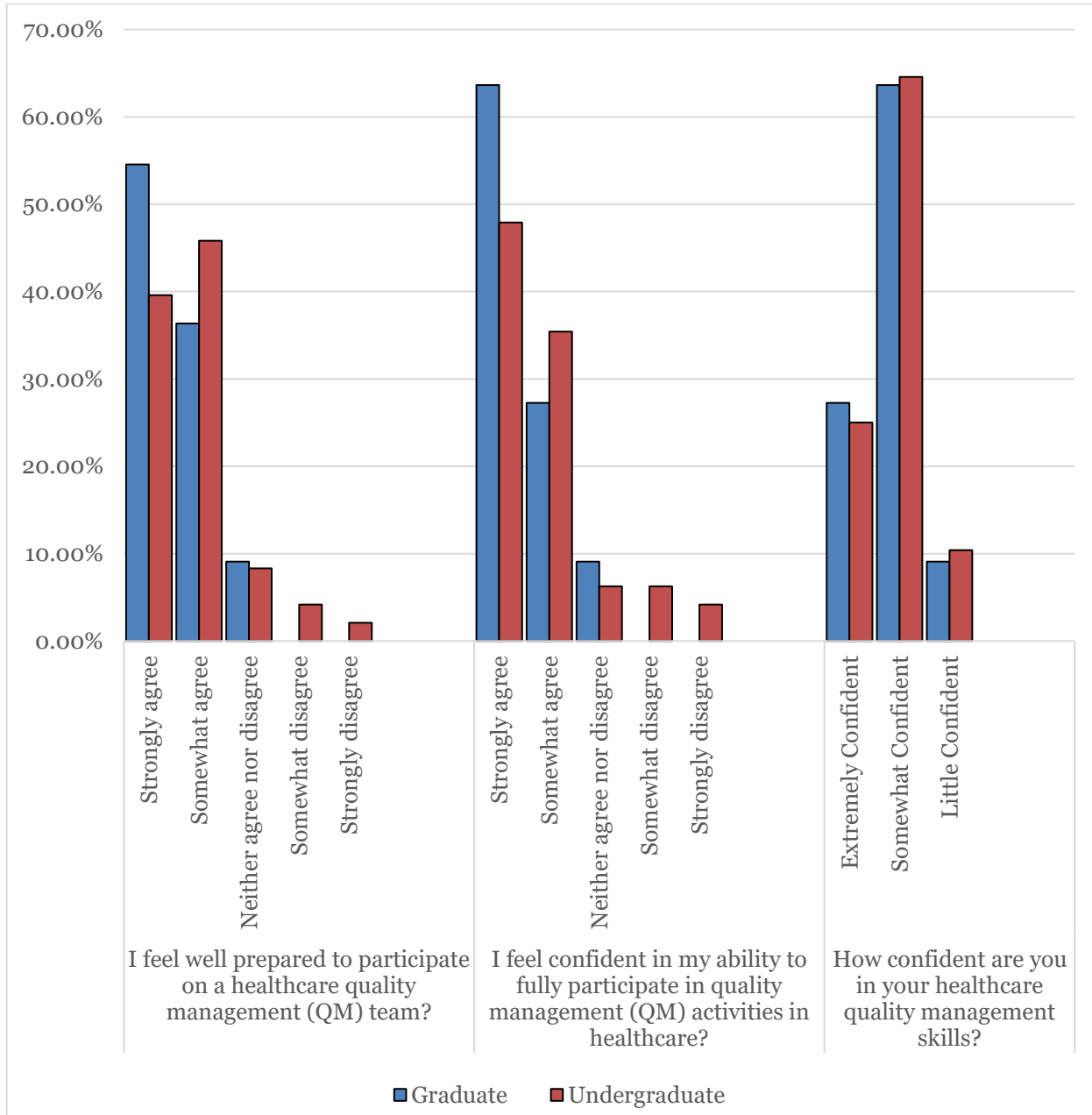


Figure 1 shows the distribution of both undergraduate and graduate student responses to the three survey questions aimed at evaluating their perception of their readiness and ability to work as part of quality management teams after graduation. The following questions were asked of each student at the end of the course: 1) "How confident are you in your healthcare quality management skills?"; 2) "I feel well prepared to participate on a healthcare quality management (QM) team"; 3) "I feel confident in my ability to fully participate in quality management (QM) activities in healthcare?"

## RESULTS

Both undergraduate and graduate students were enrolled in the course. Overall, there were 66 females and 7 males in the undergraduate class and 12 females and 3 males in the graduate class. A total of 59 out of 88 students completed the survey administered after the course for a response rate of 67.05%. Of the 73 students in the undergraduate class, 48 students completed the survey for a response rate of 65.75%. Of the 15 students in the graduate class, 11 (73.33%) completed the survey. Additionally, 72 students took the course online compared to 16 who took the course in-class. This may be due to the COVID-19 restrictions in effect at the university limiting the class size.

The distribution of student responses is presented in Figure 1. The independent sample t-test show that there are no significant differences in survey responses between the undergraduate and graduate students. In other words, the student responses were similar irrespective of their degree level. In general, more graduate level students compared to undergraduate students strongly agreed that they felt well prepared to participate on a healthcare quality management (QM) team (54.55% vs. 39.58%), felt confident in their ability to fully participate in quality management (QM) activities in healthcare (63.64% vs. 47.92%), and were extremely confident in their healthcare quality management skills (27.27% vs. 25.00%). With respect to the secondary question, "... who is responsible for quality in a healthcare" majority of the respondent indicated that "everyone" was responsible for ensuring quality in the healthcare organization.

## DISCUSSION

This study examined student perception of their ability to work as part of quality management teams and their confidence in their skills. It also inquired from respondents who they believed was responsible for ensuring care quality. Irrespective of their degree level, students at this university indicated a strong feeling about their capacity to participate in quality projects. Majority of the students surveyed agreed that everyone in a healthcare organization has a role to play in ensuring care quality and that the skills earned in the course would be helpful in their careers. While it is anticipated that not every student will go into quality management, they feel prepared to use their knowledge.

There is consensus that the United States lags other developed countries in healthcare quality (National Research Council & Institute of Medicine, 2013; Seipel, 2013; Squires, 2012). This suggests a call to action to every facet of the health system to ensure that they do their part to promote healthcare quality. The US health system will benefit from all organizations and their employees contributing to quality improvement activities. Although it may be argued that healthcare organizations have other concerns related to their survivability instead of investing in quality improvement skills in their employees, it should be noted however that quality has been linked to the improvement of financial and operational performance of the organization (Barnes et al., 2018; Dunton N, and Fisher A, 2021; Mercado, 2020). As such, healthcare organization must invest in their employees especially in developing their understanding and appreciation for healthcare quality irrespective of their job descriptions and/ or duties.

The skills and abilities that students obtain from universities and training programs must honed and nurtured even as they become employees at healthcare facilities with the goal of eliminating apathy or lack of interest in healthcare quality. The link between quality of care and other performance metrics suggests that even though employee duties may not be directly related to quality, it is just as important (Li & Sweetman, 2017).

## CONCLUSION

It is of benefit to healthcare organizations to invest in their employees and develop their appreciation and skills in quality improvement. Regardless of employee prior exposure to quality improvement, this type of investment by a healthcare organization should invariably reinforce the importance of quality for their employees, benefit healthcare consumers, profit the organization, and improve the overall quality in the health system.

## LESSONS FOR PRACTICE

- It is the responsibility of healthcare organizations to build on their employee learning; and, to continuously reinforce the importance of quality and safety.
- This will consistently lead to benefits for healthcare consumers, organizational profit, and improve the overall quality of the health system.

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