

LETTER TO THE EDITOR

Quality indicators of Physical therapy practice in PakistanROOHI ABBAS¹, SAMREEN SADIQ², HINA GUL³, SIDRA KHAN⁴^{1,2}Assistant Professor, Lahore College of Physical Therapy, Lahore Medical & Dental College, Lahore³Assistant Professor, Riphah College of Rehabilitation Sciences, LMDC⁴Physical Therapist, Department of Physical Therapy, Ittefaq hospital LahoreCorrespondence to Dr. Roohi Abbas Email: roohiwaqas@gmail.com

Dear Editor

Quality refers to the extent of superiority or excellence of something when compared with other things of similar characteristics¹. During this era of quality enhancement, more and more emphasis is now being given to raise the standards of providing quality services in health care¹. One possible way of ascertaining high quality service provision is by “measuring” the quality of services being provided, as this will help to identify either good or bad providers of services that is the health care practitioners². This has gained much importance globally and a lot of work has been done by the researchers and stakeholders to measure and to standardize the quality of health care services².

Since quality of health care is not easy to assess because of its intangible nature, the measurement of health care quality has driven towards the assessment of quality indicators³. Quality indicators which are used synonymously with “quality measures” can be defined as the quantitative measures that endow with information about the effectiveness, wellbeing and patient centered approach in health care⁴.

These quality metrics or Measures have been classified mainly into volume, structure, outcome and the process (VSOP) where volume means patient turnover which is directly linked to the experience of the health care providers (physician, surgeon etc.) as patients tends to visit care providers who are more experienced in any hospital setting, then structure stands for the facilities, infrastructure, equipments and licensures of the hospital, outcomes means rate of morbidity, mortality, functional status and quality of life of patients who sought health care services and finally process refers to those evidence based expert application of treatment protocols and interventions that affect the outcome of the patient⁵.

Ever since Avedis Donabedian laid foundation of measuring quality of health care in 1970 a lot of research has been carried out globally but in developing countries like Pakistan very few literature is available owing to lack of regulatory authorities and international accreditations which is compensated having our own accreditation standards and systems at national level for regulation of health care quality services⁶.

A branch of rehabilitative health care which is not only limited to tertiary care but also has implications in secondary and primary prevention of illness disease or injury is the Physical therapy which has emerged and revolutionized in past few decades but it is yet to introduce quality metrics and measures particularly in our clinical settings where little to no work has been done on quality indicators in physical therapy⁷. Physical therapists can use these Quality indicators in their practice to ascertain accountability, identifying gaps in care providence, delivery of services, promoting lucidity and prioritizing initiatives to improve quality⁸. We lack researches on use of quality indicators in physical therapy practice that is why this should be the topic of grave concern for future researches if we want to deliver quality services to our patients to strengthen the roots of our profession.

REFERENCES

1. Gupta KS, Rokade V. Importance of quality in health care sector: a review. *Journal of Health Management*. 2016;18(1):84-94.
2. Quentin W, Partanen V-M, Brownwood I, Klazinga N. Measuring healthcare quality. *Improving healthcare quality in Europe*. 2019:31.
3. Perić N, Hofmarcher-Holzhaecker MM, Simon J. Health system performance assessment landscape at the EU level: a structured synthesis of actors and actions. *Archives of Public Health*. 2017;75(1):1-10.
4. Piggott T, Langendam M, Parmelli E, Adolfsson J, Akl EA, Armstrong D, et al. Bringing two worlds closer together: a critical analysis of an integrated approach to guideline development and quality assurance schemes. *BMC Health Services Research*. 2021;21(1):1-12.
5. Lazar EJ, Fleischut P, Regan BK. Quality measurement in healthcare. *Annual review of medicine*. 2013;64:485-96.
6. Shah M, Perveen S. State of healthcare quality and patient safety in Pakistan. *Pakistan Journal of Public Health*. 2016;6(4):1-4.
7. Maharaj S, Chung C, Dhugge I, Gayevski M, Muradyan A, McLeod KE, et al. Integrating physiotherapists into primary health care organizations: the Physiotherapists' perspective. *Physiotherapy Canada*. 2018;70(2):188-95.
8. Westby MD, Klemm A, Li LC, Jones CA. Emerging role of quality indicators in physical therapist practice and health service delivery. *Physical therapy*. 2016;96(1):90-100.