DOREEN NJOKI MUNGUTI ID: UM87762HE96983

HEALTH CARE DELIVERY (HEALTH CARE MANAGEMENT AND LEADERSHIP)

ATLANTIC INTERNATIONAL UNIVERSITY
October/2024



1

Table of contents

1.0 Introduction	Page 2
2.0 Key components of an effective healthcare delivery system	Page 2
2.1 Patients.	Page 2
2.2 Health facilities.	Page 3
2.4 Health financing	Page 3
2.5 Leadership and governance	Page 3
2.6 Information systems	Page 4
2.7 Service delivery	Page 5
2.8 Healthcare products and technology	Page 5
3.0 Primary, Secondary, and Tertiary care	page 5,6
4.0 Main challenges in providing equitable healthcare access	Page 7
5.0 Health care delivery between private and public sector	Page 8
6.0 Role of technology in healthcare delivery	Page 9
7.0 How healthcare policies influence the quality and accessibility of ser	vicesPage 10
8.0 Effective strategies for reducing healthcare costs	Page 11
9.0 Healthcare delivery system in different countries	Page 12
10.0 How healthcare providers address health disparities in delivery	Page 13
11.0 Effects of social determinants of health in healthcare delivery	Page 14
12.0 Ethical considerations in managing healthcare resources	Page 15
13.0 Impact of telemedicine in rural areas in health care delivery	Page 16
14.0 Role of evidence-based practice in healthcare delivery	Page 17
15.0 Quality improvement models in healthcare settings	Page 18
16.0 Conclusion	Page 19
16.0 Bibliography	page 20



2

1:0 - INTRODUCTION

Health is the birth right of every individual and an essential element in human right systems. Its sustainability has become a matter of public concern, national priority and of political priority. It is multidimensional and not static. Public has become more aware with the larger population being literate. More Emphasis has been put in the prevention of diseases and health maintenance due to evolution of a wide range of health promotion techniques and programs including screening and monitoring of existing diseases.

Health, according to WHO definition, is a dynamic state of complete physical, mental and social well-being, not merely an absence of disease or infirmity.

Health care delivery is the process of providing medical care and services to patients. It involves the organization and delivery of services for diagnosing and treating diseases, as well as promoting and maintaining health. The goal of healthcare delivery is to use resources effectively to produce positive health outcomes for communities.

Health care delivery system refers to the totality of the resources that a population or society distributes in the organization and delivery of health population services. It also includes all personal and public services performed by an individual for the purpose of maintaining or restoring health. Stanhope (2001). It involves the people (all people who provide healthcare services), facilities (all facilities where care is received), services (primary, secondary, tertiary as well as rehabilitative care) and organizations such as hospice centers and ambulatory care facilities.

Developing countries and other low-income countries have not been left behind in universal health coverage (UHC). In Kenya, its progress in achieving key maternal, infant, and child health targets have been slow. However, for these countries to make rapid progress towards universal health coverage, its health system needs to have skilled human resources, minimum inputs such as drugs, commodities and infrastructure, financing, health information systems and leadership and governance. This paper covers an overview of health delivery systems and how they impact healthcare outcomes. It's an intersection of low-income countries and the developed world with the focus of achieving universal health coverage by 2030.

2.0 Key components of an effective healthcare delivery system

2.1-Patients- They are the center of the healthcare delivery system Their experiences, needs and outcomes are essential indicators of the system performance. Understanding the patient experience is a key step in moving towards patient-centered care. It involves assessing whether



3

patients receive care that is respectful of and responsive to individual preferences, needs and values. There are effective components on different levels, such as prevention services, medical services, support and palliative, and rehabilitation services, as well as components of quality improvement, leveling and service delivery levels are essential. Accordingly, the components of training society members with an emphasis on self-care and improving their health awareness level in the field of prevention services, the number of patients and patient admission rate in the field of medical services, average patient waiting time (equity and access to services), duration of the patient's stay and his shift in inpatient units (a component of service efficiency) in the field of improving quality of services. exposure to risk factors and the occurrence of high-risk behaviors and, consequently incidence of diseases, as well as the phenomenon of urbanization and increasing aging population, are considered important components affecting population health based on the number of studies and repetitions

- 2.2-Health facilities -; hospitals, healthcare centers. referral systems are the backbone of any healthcare delivery system. It's the physical location where medical services are delivered. The design and organization of these facilities have a substantial impact on patient's safety, care quality and efficiency of healthcare delivery. There's a need for logical and correct communication between levels and improving the quality of services. The governmental sector of the system is organized in order to be more efficient and effective, as well as to create equity and the possibility of individual access to the first, second, and third levels, which according to the leveling of services, people access to more specialized services through a referral system. It is very important to pay attention to this in the dimension of service delivery. Accordingly, the major cost of health services (both financial and human) is related to hospitals, which is inevitable. However, if 80-90% of patients at the first level of health care can be diagnosed and treated, there will be a significant reduction in costs, and consequently, the service will be effective (
- 2.3- Human resource for health —; A responsive, fair and efficient workforce that is productive and efficient. A health workforce works in ways that are responsive, fair and efficient to achieve the best health outcomes possible, given available resources and circumstances (i.e. there are sufficient staff, fairly distributed, they are competent, responsive and productive). According to WHO, there is still a global concern regarding healthcare distribution in different parts especially those faced by war and an increasingly aged community. There's a projected shortfall of 10 million healthcare workers by 2030 from low to medium countries. This is due to lack of payment, low pay and under-investments in education. All health professionals play a vital role in preventing, diagnosing, treating and curing physical and mental ailments. The effectiveness of healthcare providers is influenced by factors such as training, availability, and environment in which they work. Different countries are at different stages of development of their health workforce but common concerns include improving recruitment, education, training and



4

distribution, enhancing productivity and performance and improving retention. This requires arrangements for achieving sufficient numbers of the right mix, right incentive plans, regulatory mechanisms that ensures system wide deployment of support systems and enabling work environments, and also mechanisms to ensure cooperation of all stakeholders.

- 2.4- Health financing -; A core component that impacts the overall health system's performance, such as access to primary care. Raises adequate funds for health, in ways that ensure people can use needed services and are protected from financial catastrophe or impoverishment associated with having to pay for them. It provides incentives for providers and users to be efficient. It's an essential aspect that provides financial protection and enables the insured to get timely healthcare services. The global insurance penetration is at 7 % with developing countries like Kenya only having 2.3 % below the average global penetration. The major attributes for low distribution are; the cost of the insurance and lack of knowledge on the importance of insurance coverage.
- 2.5 -Leadership and governance -; A critical building block that is essential for strengthening national health systems. Leadership and governance involve assurance that strategic policy frameworks exist and are combined with effective oversight, coalition-building, regulation, attention to system design and accountability. Accountability is an intrinsic factor which involves an understanding of how services are supplied, financing to ensure adequate funding for required services. It also ensures performance around actual services and relevant information is available for monitoring and evaluation purposes. This component ensures that health authorities take responsibility for steering the entire health sector, and for dealing with future challenges as well with current problems. There are set policies that are drawn through transparent and inclusive processes, national health policies, strategy and plan that sets clear direction for the health sector. It involves formulation of the country's commitment to high level policy goals (Health equity, people-centeredness, sound public health policies, effective and accountable governance). The Processes should have accountability and adaptation to evolving needs. There should also be a strategy for translating these policy goals into implications for financing, human resources. pharmaceuticals technology, infrastructure and service delivery with relevant guidelines, plans and targets.
- 2.6- Information systems -; Good governance is only possible with good information on health challenges. It helps governments and health facilities use reporting software and human resources to make data-driven decisions. Ensure the production, analysis, dissemination and use of reliable and timely information on health determinants, health system performance and health status. A safe health information system ensures information exchanged between healthcare providers, consumers, payers, and quality monitors is secure. Health information can help in supporting healthcare policy decisions, improve patient's outcome and inform research on emerging trends





2.7- Service delivery-; This is the process by which patients receive the care and supplies they are entitled to. It's the way inputs are combined to allow the delivery of a series of interventions or health actions. strengthening service delivery is crucial to the achievement of the health-related Millennium Development goals. (MDGs), which include the delivery of interventions to reduce child mortality, maternal mortality and the burden of HIV/AIDS, tuberculosis and malaria. A good health service delivery unit should be able to deliver a comprehensive range of healthcare services to include preventative, curative, palliative and rehabilitative. This critically depends on the provision of a package with a comprehensive and integrated range of clinical and public health interventions that respond to the full range of health problems of their population. It should be able to target a large population, offering continuity of care which is quality and accessible. Health system is only as effective as the services they provide. This depends on standards, norms and guidance to ensure access and essential dimensions of quality, safety, effectiveness, integration, continuity, and people -centeredness.

5



6

2.8- Healthcare products and technology -; Use of organized knowledge and skills to develop devices, medicines, vaccines, procedures, and systems to improve quality of life and solve health problems. Health technology also includes the organizational and supportive systems used to provide care. Equitable access to essential medical products, vaccines and technologies of assured quality, safety, efficacy and cost-effectiveness, and their scientifically sound and cost-effectiveness is essential. Some of the available technologies are medical devices, assistive products, and personal protective equipment.

3.0 : Primary, Secondary, and Tertiary care

There are three levels of patients care within the healthcare system. These levels are important for they help the patient receive necessary care needed to address various health needs. Each level comes with inherent services and responsibilities helping providers at these levels personalize their healthcare services to optimize patient experiences while improving patient's outcome. From a patient's perspective, understanding different levels of care is just as important. Patients can be empowered to advocate on behalf of their medical and health needs by understanding care offered by providers at different levels.

- 2.1- Primary care-; The first point of contact for patients. Primary care services may be provided in hospitals, but patients may need a referral from a primary care physician to access secondary care. Primary health care is a people-centered rather than disease-centered service that addresses the majority of a person's health needs throughout their lifetime including physical, mental and social well-being, there has been an increasing emphasis on primary health care and it is generally recognized as the part of the health system that people use most and may be provided by a wide range of health care professionals. Continuity of care is a key characteristic of primary care, as patients usually prefer to consult the same practitioner for routine check-ups and preventive care, health education, and every time they require an initial consultation about a new health problem. So in many cases, the relationship between the patient and provider can often occur over a long period of time in primary health care versus secondary and tertiary care settings, with providers often following a patient's development and medical history for several years and sometimes most of their lifetime.
- 2.2- Secondary care -; Patients may need a referral from a primary care physician to access secondary care. Secondary care services are usually based in a hospital or clinic, though some services may be community-based. They may include planned operations, specialist clinics such as cardiology or renal clinics, or rehabilitation services such as physiotherapy. Secondary healthcare includes a wide range of specialists such as psychiatrists, cardiologists, obstetricians, dermatologists, pediatricians and gynecologists. Typically, a referral from a primary care



7

provider is needed for a patient to receive secondary care. Secondary care providers play a significant role in ensuring patients receive the right follow-up care by communicating and coordinating with primary care providers at all times.

2.3 -Tertiary care-; The highest level of healthcare, providing specialized consultative care for complex medical and surgical procedures. Tertiary care is typically provided in a hospital setting, but some elements of care may be performed on an outpatient basis. Tertiary care is often provided to inpatients by referral from primary or secondary care providers. Some of the services provided at this level include; complex treatment and procedures, burn treatments, heart surgery and dialysis.

4.0 Main challenges in providing equitable healthcare access.

Aging populations, unhealthy habits and an increase in non-communicable diseases means health, in general, is on the decline. The extent to which this decline is felt differs depending on geography and demographics. The WHO reported that over half of the world's population lacks access to basic health services they need. Equitable access and outcomes are a key priority of healthcare reforms as governments around the world look to create systems fit for future demands.

Equitable healthcare access is when everyone has the opportunity to achieve their full health potential without unfair or avoidable differences between groups of people. This means healthcare services should not vary in quality based on age, gender, race, socio-economic status, disability, language, sexual orientation or geographical location.

Equitable access and outcomes are a key priority of healthcare reform as governments around the world look to creating systems fit for future demands. As populations expand and age, the number of working-age adults with a long-term health condition or disability is on the rise. And the prognosis and opportunities available to these people can vary significantly, with geography, gender, race, wealth and education level all among the influencing factors

Social determinants of health -Factors like housing, transportation, education, and access to healthy food can impact a person's ability to receive equitable healthcare.

Health literacy- Poor health literacy can make it difficult for patients to understand health information and instructions from their healthcare providers

Insurance coverage - A lack of insurance or insufficient coverage can lead people to skip necessary care.



8

Labour shortage - There is expected to be a 10 million shortage of healthcare workers by 2030, which will be particularly acute in low and middle-income countries

System design- Poor design of systems and processes, and a failure to assimilate new science and technology can make it difficult to provide equitable healthcare.

Patient needs- Systems may not accommodate the diverse needs of patients.

Working conditions- Poor working conditions for healthcare workers can contribute to challenges in providing equitable healthcare

5.0: Health care delivery between private and public sector

Public healthcare is usually provided by the government while private healthcare can be provided for profit hospitals, self-employed practitioners and non-profit organizations.

	Private sector	Public sector
Quality of care	This sector offers higher quality of care with better facilities, shorter waiting periods and more specialists.	The public facilities are in need of revamping owing to their poor state, the queues are long with limited staff especially specialties.
cost	The cost of treatment is higher. Consultation reviews go for as high as \$50 excluding medication	The cost of treatment is cheaper with outpatient facilities charging \$4 in dispensaries and \$34 in secondary / tertiary facilities. Most facilities are usually free.
Equity	Has more equitable care since there's a moderation for all services provided across board to cater for the needs of the entire population	Changes from one facility to the other. The cost of pharmaceuticals is higher since majority of the providers prefer original brands to generics



9

Efficiency	The facilities in the private sector to include equipment's, supplies, are audited from time to time to enable easy flow of services	Most of the equipment is run down especially in developing countries, there are not enough supplies due to poor funding.
Continuity of care	Private sector has an organized system of following up clients post care. The sector is more responsive to patient needs because of market competition	There's no organized system due to personnel shortage,
Comprehensiveness and coordination	Care is efficient but not coordinated. Getting data for public research may be cumbersome in some institutions	Care is more coordinated here because of the many tools used to check on emerging trends and researches

6.0: Role of technology in healthcare delivery

Availability and accessibility of big data- The accessibility of data and the means to store and to process is a hallmark of the technological age. The internet, data capture system, search features and the ability of healthcare professionals to share information have enhanced synthesis and analysis of data. Big Data in healthcare allows the entire field to benefit from comprehensive research studies. The data allows medical professionals to stay on track of healthcare trends.

Improving access to care- the internet has become an integral part of our everyday lives, changing the way we spend our time and how we source information. This has also influenced the way patients seek health information. Technology (telemedicine/ telehealth) such as video-conferencing allows patients to receive care remotely, even in underserved areas.



10

Telemedicine is particularly beneficial to those living in rural areas and acquiring regular access to medical specialists who live far away is challenging. Teleconsultations are also beneficial to health care or other frontline staff on location as they can receive education and training virtually. However, in low- and middle-class countries, there's a challenge since, technology access is a challenge to remote areas

Reducing medical errors – There has been development of systems that are proven to reduce medical errors and save more lives. The information provided is filtered hence helping in reducing medical errors. There has been improved technology especially in manufacturing medication hence able to reduce efficacy errors. There have been improved procedures and protocols that have been able to provide evidence-based standards and guidance.

Improving communication – Technology innovations in healthcare have facilitated much smoother communication within healthcare organizations. There's clear communication in different parts of the globe with different specialties hence improved case management and patient recovery. Technology has provided software and applications that present customized education information to patients based on their specific needs and conditions. Medical professionals can now use media such as video, online discussion platforms and real time meetings for advanced knowledge. This improves case management, treatment and patient recovery.

Personalized patient's care- Providers are able to create personalized care plans for individual clients depending on their needs. The emergence of devices that can monitor blood pressure, calories on the go e.g. smartwatches have improved patient's care due to ease in access to personalized information. Mobile apps enable people to easily manage their health and well-being; everything from prompting them to get checkups, to finding general medical information or accessing test results securely online.

Analyzing and improving healthcare services – This is possible through different applications that help in gaining access to patients' medical records. Most healthcare facilities have managed to move the patient's information into cloud -based storage where retrieval is a click of a button. Electronic medical records allow all patient histories, tests, results, diagnoses and relevant information to be stored centrally in an online location, unlike before when medical records were available in different locations. This has led to great cohesiveness and better network of services which has led to better analyzing healthcare data and improve healthcare services



11

7.0 How healthcare policies influence the quality and accessibility of services

- 1. Improving compliance Policies can help healthcare facilities comply with laws and regulations which can help improve patient's care
- 2. Improving communication- Policies can help ensure that staff have the information they need to do their jobs which can improve patient's care
- 3. Improving quality Policies can ensure that healthcare services are effective, safe, timely and equitable
- 4. Improving access- policies can help improve access to care by ensuring geographic availability and improving financial protection
- 5. Improving resilience- policies can help ensure that health systems are resilient and can deliver quality services during public health emergencies
- 6. Improving workforce- Policies can help reduce differences in the ratio of health professionals to the population

8.0 Effective strategies for reducing healthcare costs.

Telehealth-With increased technology knowledge, it's possible to make virtual arrangements to quickly and effectively receive care. This Can reduce cost by eliminating travel, decreasing hospital readmissions and supplementing doctor's visits leading to reduced cost.

Wellness Programs- With a strong emphasis on preventive care, health issues can be detected earlier, making conditions easier and cheaper to address, improving health outcomes,. This reduces healthcare costs by reducing emergency room visit, hospital admissions.

Disease Management- Chronic diseases are the leading cause of illness, disability and death globally. Screening of diseases can lead to early detection leading to early treatment. Vaccination is also a vital component and can help reduce cost while improving quality of care and patient satisfaction.

Pharmacy management- Can mitigate the impact of high drug prices. Not all drugs cost the same from pharmacy to pharmacy, therefore, it's always good to pharmacy shops to get the best prices. Members should be encouraged to get discount cards that go a long way in saving cost. Educate members about use of generic medication to save on cost.

9.0: Healthcare delivery system in different countries



12

Cost- In developed countries, households spend less on healthcare because they are mostly covered. In developing countries, households spend more on healthcare because the net tax is smaller.

Performance- The Uk has higher overall health system performance than five nations that spend more on healthcare. The Us has worse access to primary care, prevention, and chronic disease management.

Private vs. Public-In low and middle -income countries, private sector healthcare delivery is argued to be more efficient, accountable and sustainable. However, the public sector has more equitable and evidence-based care.

Prices- This varies from one country to the other but the US and UK have higher cost on surgeries especially transplants compared to middle- and low-income countries. The cost of medicine also varies. Some national health systems have greatly subsidized the cost of medicine but patients are still allowed to co-pay some small amount. Other countries tightly regulate which drugs may be sold within their borders.

Health insurance system- Some countries like the UK have a health system that is publicly funded and operated entirely by the national health service, whereas a country like Switzerland has a compulsory private insurance system. Others like Germany operate through social health where it's paid through tax revenues.

10.0: How healthcare providers address health disparities in delivery

Healthcare disparities refer to differences in health and healthcare between groups that stem from broader social and economic inequities. These inequities include life expectancy, mortality, health status and prevalence of health conditions.

Acknowledging bias- Recognizing that implicit biases and past discrimination contribute to health inequities, and taking steps to address them.

Educating providers-Teaching healthcare professionals about their impact of structural racism and health disparities and patient outcomes.

Creating a zero-tolerance policy – establishing a policy that prohibits discrimination and include safe reporting system

Improving access to care-Working to reduce uninsured rates and improve access to care



13

Implementing community outreach- Care facilities can reach out to communities and implement programs to manage chronic diseases

Addressing social needs – Integrating social care into healthcare delivery can improve health equity

Supporting professional development- expanding resources and tools for providers working in resource -poor communities

11.0 Impacts of patient-centered care on healthcare delivery outcomes.

Patient centered care is that care that is responsive to and respectful of a patient's individual needs, values, and preference. It ensures that patient's values guide all clinical decisions. The healthcare professionals educate patients about their health, advise them on treatment options, and provide tools they require to achieve better health outcomes.

Improved patient satisfaction-This model ensures Patients and families are active participants in the care team and guide in decision-making process. The patient values, preferences, cultural backgrounds and socio-economic backgrounds are recognized and respected.

It also empowers patients to take greater initiative in their health care. This leads to improved health outcomes since patients are participants in their own treatment plan and treatment schedules. This reduces the level of anxiety because patients are listened and validated which improves emotional experience.

Better provider reputation- Providers have a better reputation among healthcare consumers. Organizations that are patient centered have positive outcomes because of the close monitoring which translates to satisfied clients who do referrals to their close circles.

Improved staff morale- Clinicians and other staff have better morale and productivity since there's no work overload and burnouts since workload is effectively managed.

Better resource allocation- resources are allocated more effectively. The model reduces the need for diagnostic tests and referrals which can lead to inflated treatment cost.

Reduced cost- healthcare systems can reduce expenses and increase financial margins. This is possible through virtual care.

Improved quality and safety of care- care is of higher quality and safety

Improved patient well -being- patients have a greater quality of life and well being



14

12.0 Effects of social determinants of health in healthcare delivery.

Social determinants of health are the non-medical factors that influence health outcomes. They are conditions in which people were born, grow, work, live, and age. There are other set forces like policies and systems.

Economic stability/ socioeconomic status- Plays an important role in the ability to receive healthcare. For example, health insurance is vital to receiving healthcare services but it's not accessible to all. The combination, or intersection, of economic stability with healthcare at an individual and regional level plays a key role in how we access care and support good health. In addition, socio-economic status also affects our ability to purchase nutritious foods, live in well-maintained and safe housing, and receive quality education which can further shape health outcomes.

Education access and quality -Higher levels of education are often associated with higher income levels and stable employment, making it easier to receive higher -quality healthcare services through better insurance coverage. Disparities in funding distribution, construction, and maintenance facilities, and availability of adequate resources in communities often complicate factors addressing education access and quality.

Neighborhood and the environment- Poor living conditions can expose the people to environmental hazards and pollution which increases risk of developing chronic diseases and other health conditions. There needs to be supportive environments that facilitate healthy behaviors and lifestyle for all residents.

Healthcare access and quality- This impacts healthcare outcomes by influencing healthcare services effectiveness, safety and patient-centeredness. When people have fair access to healthcare services and improved quality of care, healthcare services achieve better outcomes for all individuals. Marginalized and vulnerable populations often face barriers to receiving high quality healthcare due to socio-economic disparities, limited availability / access to providers, systemic biases and discrimination, inadequate resources and infrastructure and lower literacy levels. Other factors also leading to inaccessibility are geographical remoteness, language barrier.

Social support and community networks- these shape access to healthcare through social support networks that provide emotional, functional, and informational help to individuals during illness or need. Community based organizations and support groups can serve as valuable resources for individuals facing specific health challenges. They help promote social cohesion within communities hence improving overall population health.



15

13.0: Ethical considerations in managing healthcare resources.

Ethics should be a major component of any healthcare system. Ethics constrains the behaviour of the provider to within limits of the law (Fox et.al,2007). Resource allocation in healthcare should satisfy two major ethical criteria.

First, it should be cost-effective. Limited resources for health should be allocated to maximize the health benefits for the population served. Cost-effectiveness helps in improving people's health and well-being. It's not merely an economic concern, because improving people's health and well-being is a moral concern and an allocation of resources that is not cost-effective produces more rather than fewer benefits for people is one important ethical consideration in evaluating actions and social policies 'were benefits than would have been possible with a different allocation. Producing more rather than fewer benefits for people is one important ethical consideration in evaluating actions and social policies.

Second, the allocation should be equitable and just. Equity is concerned with the distribution of benefits and costs to distinct individuals or groups. Equity concerns the relative treatment of different individuals

However, there are other several ethical considerations that need to be put in place for fairness and consideration for all

Respect for persons; which broadly involves-

- 1. Respect for autonomy- which means treating people who can make choices about their lives with respect for being able to do so.
- 2. Protecting vulnerable groups Protecting people who are vulnerable or have diminished autonomy from harm or abuse
- 3. Privacy and confidentiality -Protecting the personal identity of participants and ensuring the information is not used or disclosed for purposes other than which it was collected.

Transparency- Ensuring that public health actions are transparent

Codes of ethics- establishing a code of ethics for public health practitioners to hold them accountable for their actions

Training- Developing an effective curriculum.



16

13.0: Impact of telemedicine in rural areas in health care delivery

Telemedicine is a health-related service with the help of tele- communicating and electronic information technologies. It's a whole collection of deliverables designed to enable patients and their physicians have better clinical outcomes. It includes online patient's consultations, remote control, tele-health nursing, physical rehabilitation.

Regular hospital visits can be expensive, particularly in the rural areas because of travel cost. Telemedicine is fast and advantageous owing to the fact that it streamlines workflow of hospitals and clinics. Medical visits are reduced through video conferencing and other virtual technology. Telemedicine helps patients to receive medical attention at the convenience of both doctor and patient making it safe and convenient.

Increasing access – Telemedicine can improve access to healthcare for rural patients by allowing them to access high-quality care without the cost and time to travel. Follow-up clinics for discharged patients become easier. Use of health apps for scheduled follow-up visits makes doctors and patients more effective and reduces the probability of missing appointments and optimizing patient's outcome.

Reducing cost- Telemedicine can reduce healthcare cost for patients and providers by reducing travel expense, improving management of chronic diseases, reducing hospital cost by providing remote access to specialists. Patients can easily take pictures of symptoms like rashes or growths through a quality audio- video system and send it to the doctor for diagnosis, hence allowing them to get a treatment process without the need for physical consultations.

Improving quality – With telemedicine, there's increased collaboration to providers, reduced number of patients referred to tertiary hospitals. There's visibility in patient care which allows patients to meet the best medical providers.

There's reduced patient experience because of reduced waiting time, enabling faster diagnosis, health examination and treatment. Patients with chronic illnesses and weak immunity do not need to queue at the consultants' clinics which gives them vulnerability to acquiring infections.

14.0: Role of evidence-based practice in healthcare delivery

Evidence Based Practice (EBP) is the integration of best research evidence with best research practice, clinical expertise and patient values. Best evidence is usually found in clinically relevant research that has been conducted using sound methodology. Clinical expertise refers to clinicians' cumulative education, experience and clinical skills. Patient values which are unique



17

preferences, concerns, expectations each patient brings to the clinical counter. Evidence-based practice begins with a clinical question, after which the clinical question is formulated, relevant scientific evidence is sought. The evidence includes study outcomes and opinions. More often than not, the patient being treated will have a more substantial difference from the population in study and it's upon the medical practitioner to make good clinical judgments depending on the presentation.

Evidence-based practice is a key component of healthcare delivery.

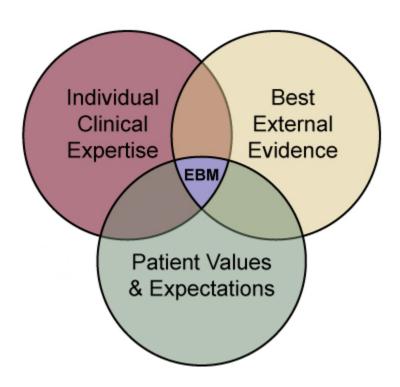
It helps improve patient's outcome- In its holistic approach that considers best available research methods that enables the healthcare fraternity to make decisions about patient care which leads to better clinical decisions and improved patient's outcome.

It also reduces cost in healthcare by ensuring resources are used wisely because it provides a framework for applying relevant scientific evidence based on a patient's condition and values.

It also leads to change in policies that have been in place for a long time. Outcomes are re-evaluated in the context of clinical questions to see what effort occurred, which may lead to generation of recommendations which are graded based on guidelines.

Research work leads to standardized practice across healthcare industry. It gives a road map for clinicians to apply valid scientific evidence to patient's conditions based on patient values and clinical judgement to tailor the treatment for patients.

It also helps healthcare workers to be constantly updated with current medical protocols which aids in improved decision-making process hence better medical outcomes. This boosts the efficiency of patient recovery because there's a better understanding of risks behind certain treatments.



15.0: Quality improvement models in healthcare settings.

Quality management is administration of system designs, policies and processes that minimize, if not eliminate, harm while optimizing patient care and outcomes.

Quality improvement is a systematic, formal approach to the analysis of practice performance and efforts to improve performance. The Quality improvement models help in collecting and analyzing data and test change. Understanding and implementing quality improvement is essential to a well-functioning practice, and is necessary for any practice interested in improving efficiency, patient safety, or clinical outcomes. It helps in identifying and understanding ways in which practice could improve which determines potential areas of improvement. Improvement is key to success. By continually collecting data and assessing outcomes, opportunities for improvement come to light and are addressable. The end result is better quality through improved performance, outcomes and customer satisfaction.

Quality improvement in healthcare involves;

Reducing medication errors and adverse effects. In the medical world, there is frequent morbidity and mortality research pertaining to a patient not having an ideal outcome. Questions are raised on what could have been done better, was the patient evaluated in a timely fashion,



19

was there a missed diagnosis, was there breach of care..etc. Evidence-based decision making is done by basing decisions on facts hence ability to produce consistent and desired results.

Improving care coordination through supportive relationships with suppliers, retailers, monetary providers and partners. Shared goals and understanding ensures reliable supply chain which enables delivery of high-quality care to patients consistently.

Improved patients' outcomes through initiatives that translate to better health outcomes for patients including reduced health mortality rates, fewer complications and shorter hospital stays. Patients who receive high quality care are more satisfied with their experiences.

Enhanced efficiency and productivity among staff. Engagement of people at all ranks is essential to reach the objective of an organization, product or service. Healthcare institutions are built on strength and commitment of it's people. It's ideal to have enthusiastic workers who are competent in their particular role within the process. By respecting those at all levels, there's improved job satisfaction, motivation and collaboration.

Regulatory compliance and accreditation. Quality improvement programs help healthcare organizations meet regulatory requirements and achieve accreditation, demonstrating commitment to excellence. Standards must be met and hospitals are held more accountable for excellence.

Achieving sustainable quality improvement requires a systematic approach that involves;

Identifying and prioritizing areas of improvement by analyzing data and gathering feedback to pinpoint areas where quality can be enhanced creating

Developing improvement plans by creating detailed plans outlining the specific actions and interventions required to address identified issues.

Implementing changes by putting improvement plans into actions and monitoring their progress.

Evaluating results by collecting data and analyzing outcomes to determine the effectiveness of the changes.

Sustaining improvement embedding successful changes into routine practice and continuously monitoring for further improvement opportunities.

16.0 CONCLUSION



20

The world is off track to make significant progress towards universal health coverage by 2030. This means all people should have access to the full range of quality health care they need, when and where they need them, without financial hardships.

Achieving universal coverage is one of the targets the nations of the world set when they adopted the Sustainable Development Goals (SDGs) in 2015. Equitable health care access was at the center of these discussions. However, inequalities continue to be a fundamental challenge for the delivery of these goals in both developed and low-income countries.

In this study, I have done a cross section of different aspects affecting healthcare delivery and outcomes. In the discussion, I have looked at Key components of an effective healthcare delivery system which include healthcare financing, human resource, health information systems, service delivery and health and leadership.

These key aspects affect the entire healthcare delivery system. I also discussed different modes of healthcare delivery, whereby primary healthcare turned out to be most inclusive, cost efficient with efficient outcomes .There's also a huge disparity between private and public sector w here the public sector offers more affordable care which is comprehensive and accessible and the private sector ensures continuity because of the close follow-up.

There are also ethical considerations that should be taken into effect in healthcare delivery to ensure confidentiality, respect and incorporation of the patient's needs.

There's also a need for Evidence Based Practice (EBP) which is the integration of best research evidence with best research practice, clinical expertise and patient values. Different researches have been conducted throughout the world to improve the quality of care given to patients. The Quality improvement models help in collecting and analyzing data and test change.

16: 0 Bibliography:

https://study.com/academy/lesson/the-health-care-delivery-system-the-us-and-worldwide.html

https://aihcp.net/2024/08/02/health-care-delivery-system-key-components-and-management-strat egies/

http://bmchealthservres.biomedcentral.com

 $\frac{https://www.elcom.com.au/resources/blog/the-impact-of-technology-in-healthcare-trends-benefit}{s-examples}$

https://www.clearpointstrategv.com/blog/examples-of-quality-improvement-in-healthcare



21

Evidence-based medicine; StevenTenny; Matthew varacallo; September 10,2024

Health care systems around the world ;Sarah E Boslaugh

https://www.kff.org/health-policy-101-international-comparison- of -health

https://onlinenursing.duq.edu/blog/Why- is -evidence- based- care -important; October 23,2022

https://www.keiseruniversity.edu/primary-secondary-tertiary-and-quaternary-understanding-levels-of-patient-care/

Nacosti (2020): bio ethic committee

https://www.paho.org/derechoalaSSR/wp-content/uploads/Documentos/Bloques-Basicos-de-un-

https://pmc.ncbi.nlm.nih.gov/article

Sistema-de-Salud-OMS.pdf

https://www.who.int/health-topics/social-determinants

Sensor international: volume 2 2021,100117



