

Non-Quality Costs of Unsafe Healthcare in a Hospital Institution



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OBJECTIVES

To evaluate the financial impact of unsafe care in health care services in a hospital institution in Barranquilla (Atlántico), Colombia.

METHODS

We conducted a cost analysis from images and laboratories, medical records (HC, acronym in Spanish) of patients attended during the year 2022 that met the inclusion criteria as triggers defined according to the Institute for Healthcare Improvement's Global Trigger Tool (GTT). Non-quality costs due to the materialization of adverse events (AE) were evaluated, including prolonged hospital stays, diagnostic

medications, procedures, and surgeries, among others, that were not initially necessary. A non-quality costing exercise was carried out. The costs were calculated in Colombian pesos (COP) and US dollars (USD) using the average value of the Representative Market Rate for the year 2022.

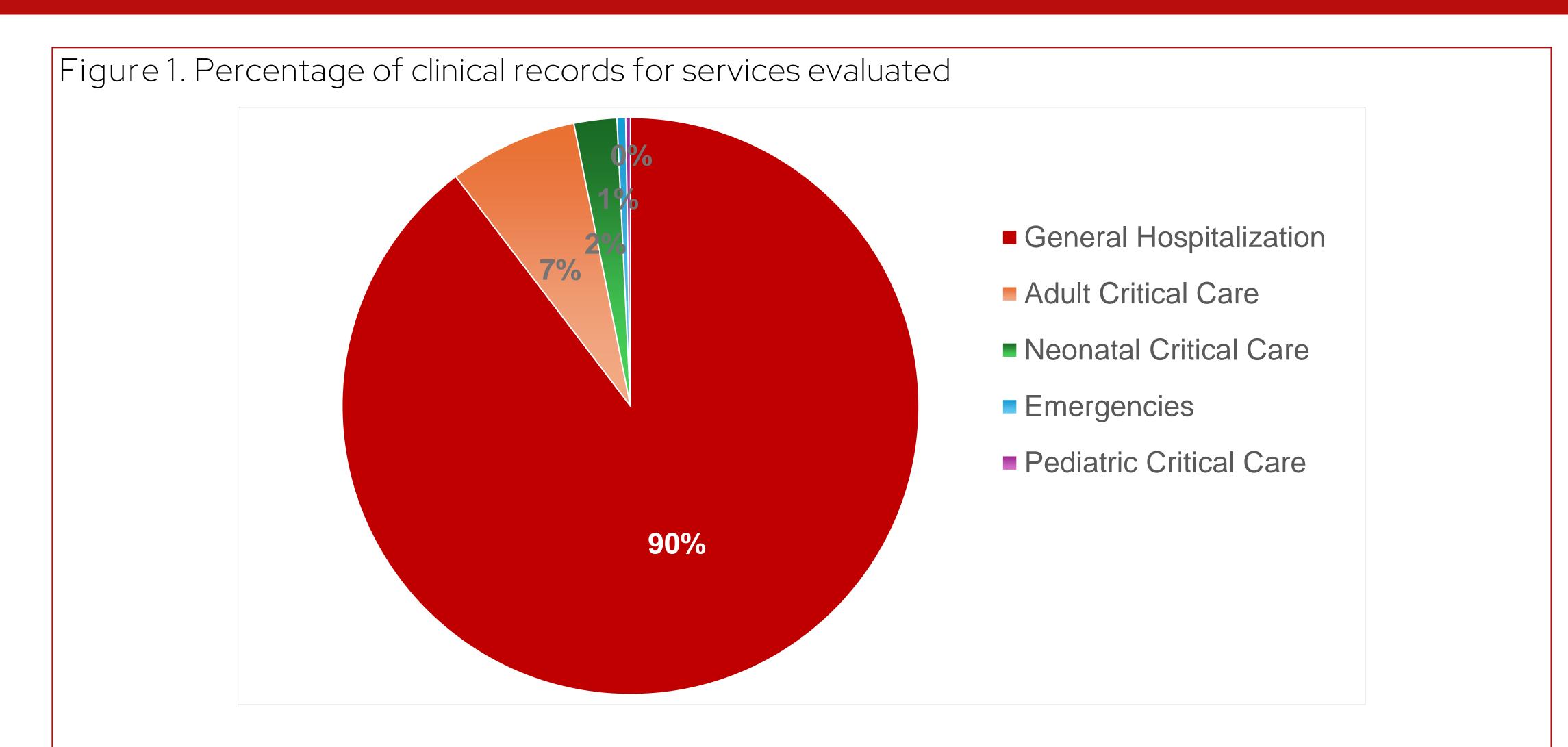
RESULTS

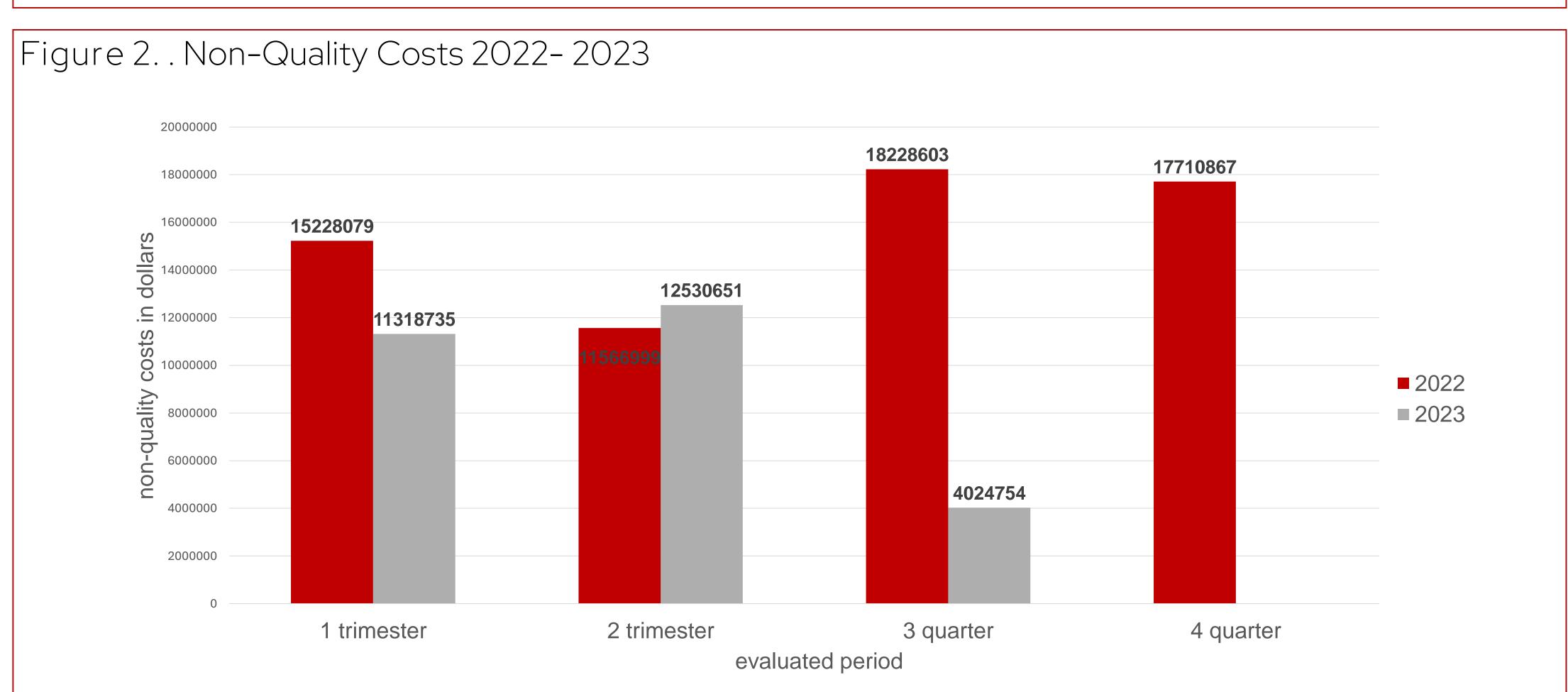
We analyzed 2,665 HCs (2,389 from the general hospitalization service, 192 from adult critical care, 64 from neonatal critical care, 13 from emergency room, and 7 from pediatric critical care), representing 1.43% of the total, in which triggers defined in the GTT were detected. Of these triggers, 106 (3.98%) gave rise to AE's, demonstrating the

effectiveness of the management of the risk of these reaching the patient in the healthcare institution. The nonquality costs generated by such AE totalized 415,383 US, which represents 0.24% of the institution's revenues in the same period. This outcome represents about a 38% decrease in these costs, compared to the previous year (669.984 US).

AFILIATIONS

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CONCLUSION

The materialization of AE risks in the patient care process can generate an important value in non-quality costs due to unsafe care, which should emphasize the importance of managing the risk of occurrence of

such events. The above shows the importance of patient safety management as a tool for reducing non-quality costs in a hospital institution.