SPECIAL ARTICLE

Commitment to quality of the Spanish scientific societies

J. García-Alegría\textsuperscript{a,*}, S. Vázquez-Fernández del Pozo\textsuperscript{b}, F. Salcedo-Fernández\textsuperscript{b}, J.M. García-Lechuz Moya\textsuperscript{c}, G. Andrés Zaragoza-Gaynor\textsuperscript{d}, M. López-Orive\textsuperscript{e}, S. García-San Jose\textsuperscript{f}, P. Casado-Durández\textsuperscript{g}

\textsuperscript{a} Sociedad Española de Medicina Interna, Agencia Pública Sanitaria Costa del Sol, Marbella, Málaga, Spain
\textsuperscript{b} Instituto Aragonés de Ciencias de la Salud (IACS), Centro de Investigación Biomédica de Aragón (CIBA), Zaragoza, Spain
\textsuperscript{c} Hospital Universitario Miguel Servet, Zaragoza, Spain
\textsuperscript{d} GA Zaragoza, Zaragoza, Spain
\textsuperscript{e} Área de Sistemas Clínicos de Información, Subdirección General de Información Sanitaria e Innovación, Ministerio de Sanidad, Servicios Sociales e Igualdad, Madrid, Spain
\textsuperscript{f} Hospital Universitario Puerta de Hierro, Majadahonda, Madrid, Spain
\textsuperscript{g} Subdirección General de Calidad y Cohesión, Dirección General de Salud Pública, Calidad e Innovación, Ministerio de Sanidad, Servicios Sociales e Igualdad, Madrid, Spain

Received 23 December 2016; accepted 8 February 2017
Available online 13 March 2017

KEYWORDS
What not to do; Scientific societies; Appropriate precautions; Commitment; Spain

Abstract This article summarizes the objectives, methodology and initial conclusions of the project "Commitment to Quality of the Spanish Scientific Societies", coordinated by the Ministry of Health, Social Services and Equality, the Spanish Society of Internal Medicine and the Aragon Institute of Health Sciences, in which 48 scientific societies participate. This project’s objectives are to decrease the use of unnecessary medical interventions, which are those that have shown no efficacy, have little or questionable effectiveness or are not cost-effective; decrease variability in clinical practice; promote the commitment among physicians and patients to properly use healthcare resources; and to promote clinical safety. The document includes 135 final recommendations for what not to do, prepared by 30 Spanish scientific societies.
© 2016 Elsevier España, S.L.U. and Sociedad Española de Medicina Interna (SEMI). All rights reserved.


\textsuperscript{#} Corresponding author.
E-mail address: jalegria@hcs.es (J. García-Alegría).

2254-8874/© 2016 Elsevier España, S.L.U. and Sociedad Española de Medicina Interna (SEMI). All rights reserved.
Compromiso por la calidad de las sociedades científicas en España

Resumen En este artículo se resumen los objetivos, la metodología y las primeras conclusiones del proyecto «Compromiso por la calidad de las sociedades científicas en España», coordinado por el Ministerio de Sanidad, Servicios Sociales e Igualdad, la Sociedad Española de Medicina Interna y el Instituto Aragones de Ciencias de la Salud, en el que participan 48 sociedades científicas. Los objetivos de este proyecto son: disminuir la utilización de intervenciones médicas innecesarias, que son las que no han demostrado eficacia, tienen escasa o dudosa efectividad, o no son coste-efectivas; disminuir la variabilidad en la práctica clínica; difundir entre médicos y pacientes el compromiso con el uso adecuado de recursos sanitarios y, por último, promover la seguridad clínica. En el documento se incluyen 135 recomendaciones finales de «no hacer» elaboradas por 30 sociedades científicas españolas.

© 2016 Elsevier España, S.L.U. y Sociedad Española de Medicina Interna (SEMI). Todos los derechos reservados.

Background

Professional societies are committed and obliged to guide the health authorities and society as a whole on how to improve health care. The Charter of Professionalism (developed jointly by the European Federation of Internal Medicine and the American Board of Internal Medicine1 and signed by numerous societies and institutions) included the professional commitment to better quality health care, to patient safety, to using health resources correctly, to the fair distribution of finite resources and to healthcare based on rational and effective management of these resources. It has been proposed that efficient, cost-conscious care should fall within the professional competency of clinicians.2,3 The Medical Code of Ethics states that medical professionals are obliged to seek the most efficient way to conduct their work and to seek the optimal performance of the means made available to them by society.4 The commitment to efficiency should be a guiding force for all clinical actions, and it is especially necessary in the current context of Spain. Based on this, professionals aspire to offer solutions within their field of responsibility and to help improve the health system.5

There is widespread evidence that certain diagnostic practices, health care profiles and treatments, some of which are costly, do not provide significant added value for patients. Decreasing these practices is a measure of efficiency that has no impact on the quality of care or health outcomes.

One such example of this commitment is the American Board of Internal Medicine´ “Choosing Wisely” initiative, which seeks to improve the health system’s overall efficiency in the US, with a commitment from multiple institutions. Since the launch of ”Choosing Wisely”, a number of published articles have reviewed the general objectives of the project,6,7 offering practical recommendations for efficiency,8–10 commenting on low-value preventive activities,11 reviewing the appropriate use of radiological12,13 and analytical tests14,15 and discussing the method for preparing recommendations and outcome measures.16

In 2012, the Spanish Society of Internal Medicine (SEMI) proposed a project that would involve other Spanish scientific societies, with the aim of reducing low-value activities in Spain. The project was ultimately approved by the Ministry of Health, Social Services and Equality under the name “Commitment to Quality by Scientific Societies in Spain” and falls within the realm of activities of the Spanish Network of National Health System Technology and Services Assessment Agencies. This project has been jointly coordinated by the Ministry of Health, Social Services and Equality itself, the Aragon Institute of Health Sciences with the team from the Clinical Practice Guidelines program ”GuíaSalud” and SEMI. It is an inclusive, participatory and open project aimed at practitioners, patients and health organizations, with a solid scientific base and distinct stages in its execution.

The project’s main objective is to reduce the number of unnecessary medical operations, i.e., those without proven effectiveness, with little or dubious effectiveness or those that are not cost-effective. The secondary objectives are to reduce clinical practice variability, to broadcast the commitment with the adequate use of health resources and to promote clinical safety and the quality of care. This article describes the methodology used for the selection and details the 135 final recommendations by 30 Spanish scientific societies.

Methodology

The methodology was structured in the following stages:

1. Identification of “do not do” recommendations in clinical practice guidelines and other evidence-based sources.

2. The preliminary list of “do not do” recommendations were selected and prepared by the scientific societies involved and the project coordinator group, with the aim of having a preliminary list of 15 “do not do” recommendations (10 proposed by the societies and 5 by the coordinators).
دریافت فوری
متن کامل مقاله

امکان دانلود نسخه تمام متن مقالات انگلیسی
امکان دانلود نسخه ترجمه شده مقالات
پذیرش سفارش ترجمه تخصصی
امکان جستجو در آرشیو جامعی از صدها موضوع و هزاران مقاله
امکان دانلود رایگان ۲ صفحه اول هر مقاله
امکان پرداخت اینترنتی با کلیه کارت های عضو شتاب
دانلود فوری مقاله پس از پرداخت آنلاین
پشتیبانی کامل خرید با بهره مندی از سیستم هوشمند رهگیری سفارشات