ORIGINAL ARTICLE

Quality indicators in the treatment of patients with depression, bipolar disorder or schizophrenia. Consensus study☆

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Abstract

Objective: To define a set of indicators for mental health care, monitoring quality assurance in schizophrenia, depression and bipolar disorders in Spain. Material and method: Qualitative research. Consensus-based study involving 6 psychiatrists on the steering committee and a panel of 43 psychiatrists working in several health services in Spain. An initial proposal of 44 indicators for depression, 42 for schizophrenia and 58 for bipolar disorder was elaborated after reviewing the literature. This proposal was analysed by experts
Introduction

Care quality evaluation systems have become more widespread, making it possible to compare care facilities. These systems include a series of indicators that offer information on the working of care facilities, according to country, for professionals as well as patients, their family members and citizens.

The use of these information systems combined with the modification of clinical practice so that it fulfils the criteria set out in practical guides, has been considered to be a means of guaranteeing the quality of care in the field of mental health and promoting structured and organised multidisciplinary treatment.

In the case of mental illnesses, until relatively recently very few indicators were used to monitor and improve care. Studies have gradually been published, above all in Anglo-Saxon countries, which focus on monitoring the quality of mental health care.

Two basic approaches have been used. The first of these is the monitoring of indicators in national or regional quality assurance systems. For example, Canada and Denmark have opted to design a healthcare monitoring system that includes the treatment of patients with schizophrenia. The STABLE project has set standards for good care in bipolar disorder, while other studies have used indicators to evaluate the degree to which patients are psycho-socially integrated. The second approach is to audit hospitals using indicators. In Holland, for example, a set of 6 measures to apply during an audit have been identified.

The psychiatric literature describes how quality indicators have been used to implement benchmarking systems.
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