

# Emerging trends in management control and quality improvement in healthcare: A PRISMA Systematic Literature Review

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## **Emerging trends in management control and quality improvement in healthcare: A PRISMA Systematic Literature Review**

### **Abstract:**

Today healthcare management is an accelerating field with the increasing need for more control and growth strategies in the healthcare quality areas. Using the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) methodology, this systematic literature review (SLR) explores new trends in management control and quality improvement in healthcare. Supplementing recent research, this review provides a thematic landscape, methodology trend, and notable findings of innovative approaches and evolving practices in this domain. The introductory content in this review highlights key studies to provide a broad view of the current state of the art regarding new frameworks and interventions for enhancing healthcare quality improvement. The review also contextualizes issues of resource allocation, organizational change and patient care as challenges and implications associated with management control in healthcare settings. This synthesis not only reaffirms key findings, but also provides recommendations for future research to maximize implementation of effective healthcare management practices.

**Keywords:** Management Control, Quality Improvement, Healthcare

**Classification JEL :** M41, I18 Paper

**Paper type:** Theoretical Research

## 1. Introduction

Global healthcare systems are constantly challenged to provide a better quality of care at lower costs while achieving improved patient outcomes, rendering effective management control and quality improvement mechanisms as paramount. Innovative approaches to healthcare management control have drawn more attention in recent decades. These ideas are motivated by efficiency and quality considerations in healthcare organizations as well as financial accountability. By promoting patient-centric care practices, improving resource allocation, and enhancing transparency, this new type of management control has the potential to completely transform healthcare around the world. Health service organizations can now monitor, evaluate, and improve service delivery to improve overall performance in the highly regulated healthcare services sector thanks to the introduction of quality improvement models.

The significance of management control systems and ongoing quality improvement has been further highlighted by the healthcare industry's rapid digital transformation, especially since the COVID-19 pandemic. Technologies like telemedicine platforms, artificial intelligence (AI)-driven analytics, and electronic health records (EHRs) have increased efficiency but also brought up issues with interoperability, data governance, and privacy. As a result, management control frameworks need to change to incorporate new technology while maintaining adherence to moral principles and patient rights. This development also emphasizes how clinical efficacy, organizational responsibility, and the general standard of patient care are becoming increasingly interdependent.

Recent studies have increasingly concentrated on context-dependent control policies and data-driven mechanisms to address complex healthcare issues, driven by the demands of both academia and industry. For example, Total Quality Management (TQM) frameworks and Lean Six Sigma techniques have been modified for use in clinical settings in an effort to maximize resource utilization, minimize waste, and reduce errors. Adopting such programs is still difficult, though, and calls for large upfront expenditures, steadfast leadership support, and intensive organizational change management. Furthermore, the need for transparency and performance monitoring must be balanced with the serious concerns about patient confidentiality and regulatory compliance brought up by the sensitivity of health-related data.

Against this backdrop, the purpose of this systematic literature review (SLR) is to integrate existing knowledge on management control and quality improvement in healthcare with respect to their recent evolution, predominant approaches, and the particularities of the healthcare field. Using the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) framework, this review adopts a structured and transparent approach to synthesize relevant studies. Our contribution is threefold: first, to map the thematic landscape of research on healthcare management control and quality improvement; second, to highlight methodological and practical innovations that can guide future reforms; and third, to discuss the implications of these findings for both practitioners and policymakers.

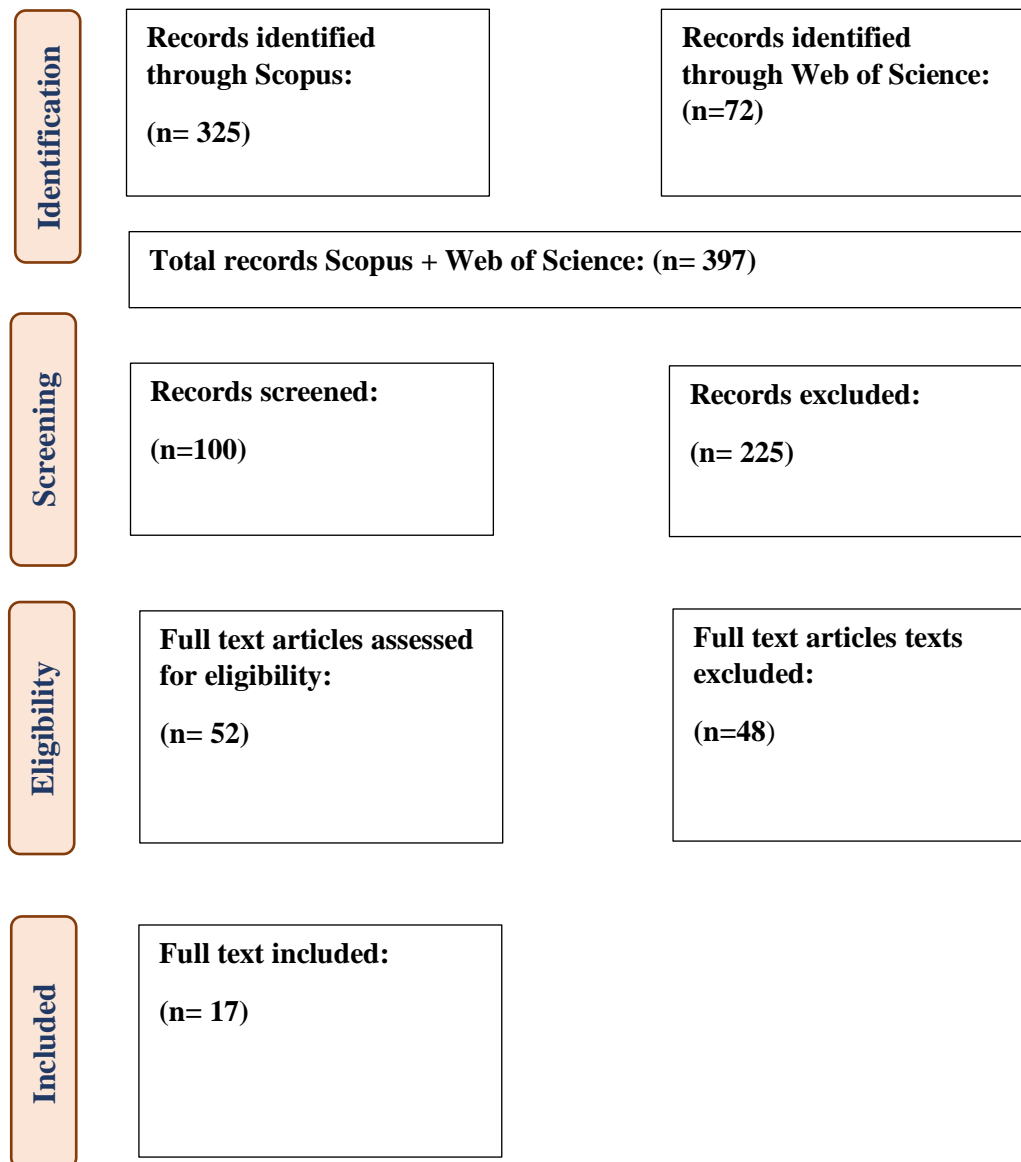
By consolidating insights from diverse empirical and theoretical contributions, this review not only reaffirms the central role of management control in achieving sustainable healthcare outcomes but also underscores the need for innovative, interdisciplinary, and ethically responsible strategies. Ultimately, this synthesis seeks to support the implementation of effective healthcare management practices that align efficiency with equity, thereby contributing to the broader goal of high-quality, accessible, and patient-centered healthcare systems.

## 2. Methodology

Our Systematic Literature Review (SLR) was conducted based on a methodology and

organizational structure guided by the PRISMA which is recognized as gold standard protocol for identifying, screening, and selection of high-quality studies. This started with searching two of the main academic databases, Scopus and Web of Science which resulted in a total of 397 records being identified. For clarity of our review, we screened the first 100 articles for their relevance and methodological quality, thus rejecting an additional 225 articles based on title and summary analysis. These steps left us with 52 full-text articles, which were then evaluated for eligibility. This process led us to exclude 48 articles due to issues such as lack of methodological robustness or misalignment with the research questions. In the end, we narrowed it down to 17 articles that gave us the most quality and relevant content for investigation. This narrow group enabled an extensive, but still systematic synthesis of existing literature on our subject.

**Figure 1: PRISMA Flowchart**



*Source: Author*

### **Identification**

In the identification phase, we conducted a comprehensive search across two major academic databases, Scopus and Web of Science, to capture a broad selection of articles related to our topic. We used a detailed search string:

> ("management control" OR "control systems" OR "organizational control") AND ("quality improvement" OR "quality management" OR "performance improvement" OR "continuous improvement" OR "service quality") AND ("healthcare" OR "healthcare" OR "hospital" OR "clinical" OR "medical")

This search yielded a total of 397 records 325 articles from Scopus and 72 from Web of Science. This phase was critical to ensure that we included a wide range of perspectives on management control systems and quality improvement within the healthcare sector.

### ***Screening***

In the screening stage, we performed the exclusion process to eliminate irrelevant and duplicate study articles. We then screened for duplicate records of the 397 records to get the database to a manageable quantity. With the original dataset after deduplication, we narrowed it down based on language and type of source. Only English language articles published in peer reviewed journals were included as these are able to increase the reliability and accessibility of the data. Furthermore, we limited our search to 2020 to 2024 articles to include the most recent trends and trends in the field. This filtering process generated a subset of 100 articles.

### ***Eligibility***

The remaining articles were reviewed in detail during the eligibility phase. Fifty-two full-text articles were evaluated for relevance to our focused research questions. At this stage, we conducted an in-depth assessment of the content, methods and focus of each article. Articles not containing valuable information about healthcare management control systems, quality improvement or related fields were discarded. For example, papers whose main focus was non-health related or that did not have an empirical or theoretical contribution towards our topic were excluded. This was necessary in order to end up with high quality and directly applicable studies for our final analysis.

### ***Inclusion***

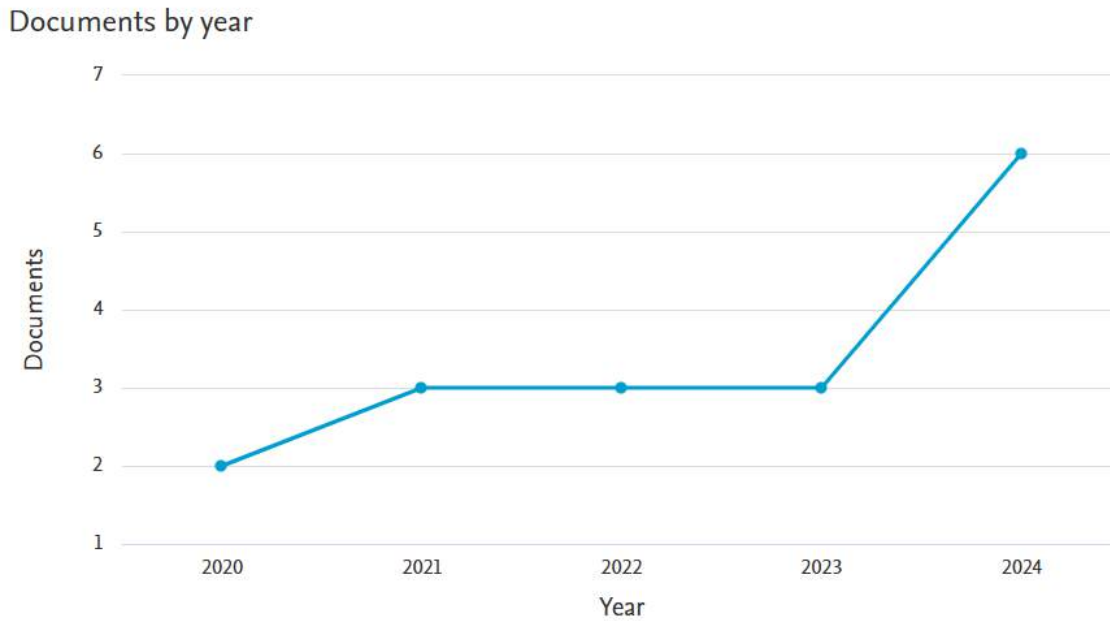
In the last phase of the inclusion process, 17 articles remained that were in line with all our criteria and had a clear emphasis on the nexus between management control and quality improvement in healthcare. These articles were included in the review due to their potential contribution to implementation research questions.

## **3. Results and discussion**

### **3.1. Descriptive Analysis**

Year of publication trends of papers These changes over time in the output of papers indicate a steady growth of literature on management control and quality in healthcare. With only two document in 2020 and the interest remains similar by modestly increasing to three documents in 2021. This consistent interest indicates a new research attention of the healthcare domain. However there does not appear to be a corresponding rise from 2022 to 2023, indicating that the output has currently capped off.

Figure2 : Publications by year



Source: Author

A noticeable increase is observed in 2024 with six publications, twice the number of previous years, indicating a renewed interest in this field of research. This significant increase also reveals that management control systems and quality improvement procedures may be more considered, particularly as a remedy to healthcare challenges in the aftermath of the pandemic.

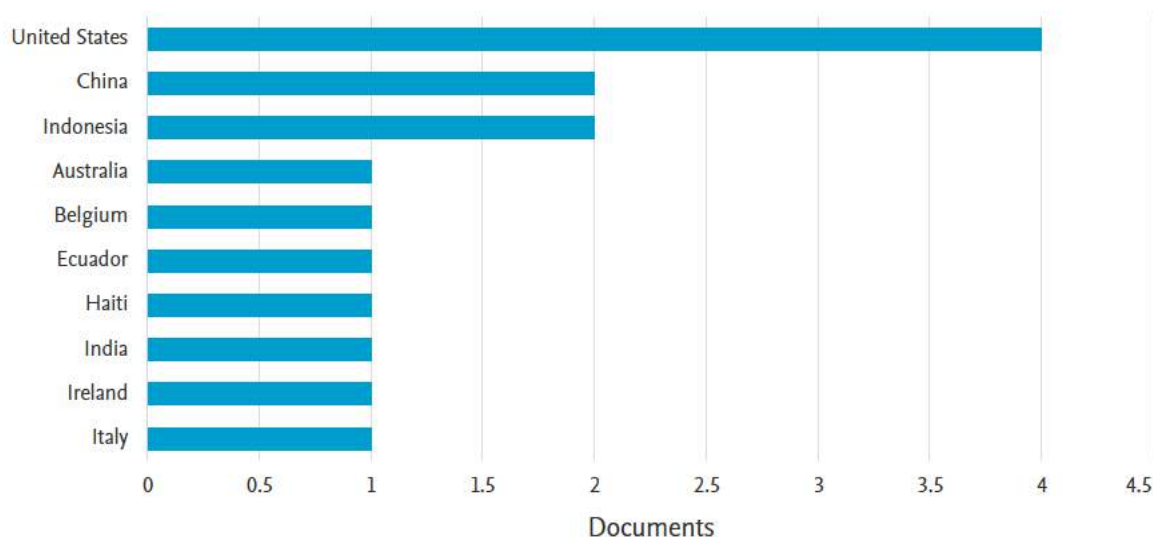
Table 1: Publications by journals

Journal	Number of Publications	Percentage (%)
Scientific Reports	1	5.88%
Health Systems and Reform	1	5.88%
Australian Journal of Advanced Nursing	1	5.88%
Journal of Advanced Pharmacy Education and Research	1	5.88%
F1000Research	1	5.88%
Journal of Diagnostic Medical Sonography	1	5.88%
Journal of Hospital Management and Health Policy	1	5.88%
Joint Commission Journal on Quality and Patient Safety	1	5.88%
Current Traditional Medicine	1	5.88%
Heliyon	1	5.88%
Revista de Ciencias Sociales	1	5.88%
Journal of Management Control	1	5.88%
Journal of Radiology Nursing	1	5.88%
American Journal of Health-System Pharmacy	1	5.88%
International Journal of Business Process Integration and Management	1	5.88%
Pharmaceutical Technology Europe	1	5.88%
Klinicheskaia Laboratornaia Diagnostika	1	5.88%
<b>Total</b>	<b>17</b>	<b>100%</b>

Source: Author

The table lists the 17 articles according to journal, all of which have contributed one article to the special issue (5.88% each), demonstrating the interdisciplinary character of the field of management control and quality of care in healthcare. Publications such as Scientific Reports and Heliyon demonstrate the level of scientific interest in these areas. Topics such as Health Systems and Reform and Journal of Hospital Management and Health Policy concentrate on healthcare policy and system reform. Pharmacy-centered journals are covering issues of QC in pharmaceutical practices, and publishing is conveying the quality movement to imaging and diagnostics.

*Figure 3: Publications by countries*



*Source: Author*

This map depicts the spread of publications by country, small areas represent countries with the least research output on management control and quality improvement in healthcare. The United States has the highest number of documents (4), which could show a strong trend and even more proportionate resources to deepen and used in practice management control systems in healthcare domain. This might mirror its already considerable strength in healthcare and increased focus on performance improvement and accountability in its health system.

China is next, also with a potent interest, but slightly fewer documents. This is in concert with recent health reform in China and also current initiatives directed at improving quality and efficiency of health services. Leading third place is Indonesia, indicating the growing concern over quality management in healthcare, as health requirements continue to change and modernization is being applied to the sector.

The other countries (Australia, Belgium, Ecuador, Haiti, India, Ireland, and Italy) have one document each, suggesting a more restricted but nevertheless relevant involvement in this subject. These could potentially be doing some more in-depth cases studies of countries or focused research in some healthcare context appearing to be working in different approaches and challenges in different healthcare systems. There is clear general interest in management control by countries in the sample, but there is also probably variation in levels of engagement and focus by country dependent on local healthcare priorities and resources.

### **3.2. Results**

- ***Quality control and Assurance in Laboratory and Pharmaceutical Practices***

The importance of high-quality, efficient and reliable systems in the medical sector cannot be overstated, where Quality Control (QC) and Quality Assurance (QA) procedures are of great importance to verify the trustworthiness and safety of health diagnostics and pharmaceutical

systems. The sub-section presents an overview of the most important developments and trends in these fields, emphasizing approaches that improve medical care provision.

Nazarova et al. (2022) highlight QC enhancements for PCR based testing in the era of COVID 19. The study emphasises the need for good business practices and error management procedures to maintain the accuracy of diagnoses, in particular diagnoses made during public health emergencies. Format and turnaround time highly dependant on clinical needs To ensure the sustainability of a high quality PCR testing service for this crucial public health need, this study provides a template for achieving high quality diagnostics in an evolving situation, and illustrates how the (current) real time can inform future quality assurance strategies.

Similarly, Song et al. (2024) focus on the necessity of reliable QC systems for biochemical analyzers. Through a description of methods to ensure precision and reproducibility of test results, the study supports the reliability of laboratory testing. Accurate biochemical investigation is critical to patient care, affecting diagnosis and treatment plans. Integration of automation and periodic calibration are important to maintain high quality in clinical laboratories, and this study emphasizes this essential aspect of automation.

Erowati et al. (2024) shift the focus to drugs management, and examine drug procurement and stock control systems. Their work emphasizes that optimal procurement processes are critical for assuring the quality and availability of medicines. "With better operational efficiency we can reduce delays and stock out, which translates into patient outcome. The expression of effective resource utilization as being a pillar of general healthcare quality This research suggests that efficient utilization of resources is a core factor of health services quality.

Akanksha et al. (2023) discuss QC in conventional medicine, introducing the concept of Q markers for normalization of actions. Their study supports measures for assuring high quality and safe herbal products, filling a gap in the traditional medicine regulation. Integrating modern QC tools with regular practice of traditional medicine as followed in the present study may also foster its acceptance and assimilation in the other part of healthcare services.

Finally, Ramnarine (2023) suggests a feedback feedforward control approach for lifecycle management in the pharmaceutical industry. This research underscores the need for responsible risk management and regulatory compliance during every stage of the product life cycle. These strategies can be adopted by pharmaceutical manufacturers to improve the drug quality, safety, efficacy, marketability, and availability.

- ***Process and Framework Innovations for Healthcare Quality***

Vanhaecht et al. (2024) offer the "House of Trust" template that focuses on leadership driven quality improvement sitting on the foundation of trust, transparency, and shared values. Among the pillars of effective healthcare systems, this model recognizes trust as a key element which builds cooperation among healthcare staff, patients and managers. The framework emphasizes the importance of ethical leadership and patient focused care in the development of sustainable progress across healthcare, and represents a transformational model of quality improvement that is shaped in line with an organization's ethos and values. Considering the relevance of standardized procedures, Alraimi and Al Nashmi (2024) discuss the use of JCI management standards for quality improvement in healthcare services. Their analysis also illustrates how adherence to these internationally recognised standards contributes to the accreditation service guarantee. The authors note that JCI standards enhance operational performance, and also increase patient safety and satisfaction, the two being critical indicators of quality assurance across a variety of healthcare settings.

Prentice et al. (2024) explores the application of implant registries in the safety and cost effectiveness of healthcare. Implant registries monitor the performance and outcomes of medico technological devices, and provide unique data for quality improvement and patient safety. Through the inclusion of these registries within health systems, care teams can proactively flag

and manage potential issues, minimizing complications and maximizing resource utilization and allocation. The study emphasises the dual benefit both improved patient care and financial efficiency making implant registries indispensable in the context of modern healthcare.

Sohal et al. (2022) is concerned with the use of Lean Six Sigma (LSS) methodologies in healthcare. Some of the key enablers regarding LSS projects mentioned in their study are leadership involvement, teamwork, and data informed decisions. The research reveals how LSS concepts improve processes, eliminate waste, and better patient services. LSS is a robust methodology that works by identifying wastage and promoting sustained improvement; as such, it is directly applicable to delivering high quality while lowering healthcare costs.

- ***Policy and System Level Improvements***

Hashimoto et al. (2020) explore the barriers to UHC in Haiti, a country with low health system capacity and financial capacity. Among the findings, the research uncovers systemic barriers such as limited funding, workforce gaps and geographical inequities in access to care. It also describes mechanisms to foresee and address problems, such as the better governance, fair allocation and community-based healthcare. Lessons learnt the lessons learnt in this study are useful in other low resources settings and the necessity for sustained policy political commitment, intersectoral cooperation, and consideration of the social determinants of health in achieving UHC.

Nasution et al. (2021) investigate how TQM principles can be implemented in hospitals and the consequent effect on healthcare performance. TQM emphasises ongoing improvement, customer satisfaction and the participation of staff. The research demonstrates how TQM can increase hospital efficiency, decrease error and enhance patient outcomes through establishing a culture of accountability and quality. Critical factors of success are commitment of leadership, strong surveillance system, good communication. This finding emphasizes that TQM is applicative in various healthcare environments, thus serving as a conduit for organizational reform efforts to deliver distinction.

Ordóñez Parra et al. (2021) study internal control systems in higher education institutions with comparisons to the field of healthcare management. The research demonstrates how oversight mechanisms – in the form of risk management regimes, performance audits and transparency tools – can help improve both administrative efficiency and accountability. They are applicable to healthcare institutions in the management of complex systems requiring cross departmental cooperation. Internal controls promote more efficient use of resources, adherence to policies, and service delivery by improving healthcare quality through the reinforcement of systems of management, administration, and accountability.

- ***Patient Centered Care and Safety***

Yilmaz and Celik (2022) tackle the issue of patient privacy in intensive care units (ICUs) as a critical factor affecting the quality of care. Privacy is not only a basic patient right; it is also a factor of dignity and trust in the relationship between healthcare providers and the patient. The research shows that privacy issues can lead to emotional distress, slow down recovery and interfere with trust in health care providers. Proposed actions are development of private architectural solutions, staff training on confidentiality, and nurture of a respectful environment. This study demonstrates protecting privacy is vital to comprehensive patient centric care, particularly in high stress environments such as ICUs.

Fouda et al. (2023), who address an area of patient care that is specialised but important, bladder management in □ 2014 The College of Radiographers. Bladder disorders are a frequent consequence of stroke and can cause infection and impair quality of life. This article discusses approaches to optimize bladder evaluation and treatment that include implementing best evidence protocols, fostering multidisciplinary care and educating patients and caregivers.

Through fewer complications and an increased comfort level to the patients, these interventions lead to a superior recovery. The study highlights a need to address individual care processes for comprehensive patient centered care.

Riemann et al. (2020) focus on patient safety in diagnostic imaging, specifically the decreased radiation exposure in pediatric patients. Quality programs are used to highlight programs to reduce unnecessary radiation by encouraging the effective use of non ionizing imaging techniques, protocols for ensuring appropriate image usage, and the integration of other physicians in imaging venues. Reducing radiation exposure is particularly crucial for children, who are at greater risk for long term adverse effects. These are not only safety measures, they also add comfort to those involved with the response and build trust in the diagnostic process, akin to the overarching goal of patient-centered care.

- ***Indicators and Measures of Quality in Healthcare***

Liu et al. (2024) investigate the relative performance of measures that reflect process and outcome when judging the quality of healthcare, and apply them in a clinical setting in the context of healthcare (breast cancer) treatment. Process measures, reflecting compliance with evidence-based protocols, have been demonstrated to yield a more timely and actionable assessment of the quality of care compared with outcome measures (which frequently are contingent on patient recovery or long-term survival). The research highlights the value process indicators provide as real time feedback for quality improvement efforts, although outcome measures also are important, according to the authors. For example, if timely chemotherapy was delivered or surgical guidelines were followed, we ensure the patient received evidence-based care that should result in a positive short and a long-term outcome. This study emphasizes the need to integrate process indicators into the evaluation of the quality of care in order to ensure constant and reliable care.

Kraus (2021) discusses aspects of quality and access in pharmaceutical care, with emphasis on indicators in safe and effective drug use. The action underscores the importance of total quality throughout the drug supply chain from raw material to consumer. Safety surveillance systems of medicines, availability to patients and compliance. Through measurement of these indicators, weaknesses of healthcare systems can be identified and efforts can be made to prevent adverse drug events and improve equitable access to treatment. This observation also underscores the need for health authorities, regulators, pharmaceutical companies to work in coordination in order to assure product quality and safety and efficient control mechanisms for drugs.

- ***Cross Disciplinary Applications and Innovations***

Kraus (2021) discusses the safety and availability of good quality medicines in public health policy and provision. The study describes how linking pharmaceutical quality assurance to public health objectives results in the availability of safe, effective and affordable medicines. Key activities include strengthening regulatory control, fostering international cooperation, and formulating plans for fair access to further interventions. Its finding highlights where healthcare systems intersect with policy enforcement and economics, as the gulf in supply chain and law have been filled in. They add that the findings make it clear that enhancing drug quality is not only a clinical problem, but is a public health priority that will need action from policymakers, among others, and coordinated dialogue among drug makers and healthcare professionals.

Vanhaecht et al. (2024) introduces the “House of Trust”, a joint model of leadership with the quality improvement at patient level within healthcare. This new model underscores the values of trust and transparency and the importance of shared values and mechanisms to promote cooperation between disciplines and levels of care. By making trust a central element of organizational culture, it helps build multi-disciplinary approaches to leadership that knit together clinical, administrative and managerial skills. It is an example of how values-based

leadership can result in system change, affecting both patient safety and staff engagement. The framework also provides tangible resources for healthcare leaders to utilize in conquering issues as they relate to resource distribution, crisis trajectory, and patient focus. This trans disciplinary approach connects organizational development with clinical excellence to form a comprehensive approach to quality improvement.

#### **4. Discussion**

The table (Appendix 1) provides a summary of 17 empirical studies focusing on healthcare management control and quality improvement. The selection of them touches on a variety of topics, such as the QA in diagnostics (Nazarova et al., Song et al.) leadership, organizations frameworks (Vanhaecht et al.), patient developmental care (Yilmaz & Celik, Fouda et al.), and system reforms (Hashimoto et al., Nasution et al.). The studies incorporate novel perspectives, such as Lean Six Sigma (Sohal et al. and the “House of Trust” (Vanhaecht et al. ), emphasizing ideas with immediately applicable methods for strengthening health care systems, leadership and trust.

Global problems, including universal health coverage in Haiti (Hashimoto et al.) and quality control in folk medicine (Akanksha et al., represent the incorporation of cross disciplinary and international viewpoints, and have wide applicability. Similarly, research in patient safety and confidentiality also focuses on ethical and patient centered care.

Although the studies are diverse in their origins, the number of study types and specific qualities could be more varied for depth. Nevertheless, the table serves as a robust tool to develop new themes and action driven measures to the healthcare quality improvement literature, the interplay of new methods and systems and patient focused strategies.

#### **5. Conclusion**

This review systematically examined 17 articles selected through the PRISMA (Preferred Reporting Items for Systematic Reviews and Meta analyses) protocol to identify new developments in healthcare management control and quality improvement. Through review of these studies, major themes emerged that focused on quality control/assurance, process innovations, policy/systemic change, patient focus, and other interdisciplinary efforts.

Quality control and assurance are still of great importance in maintaining diagnostic reliability as well as pharmaceutical safety, as seen in the evolutions of laboratory and drug managing systems. At the same time, novel methods such as Lean Six Sigma and the “House of Trust” emphasize the significance of leadership and process optimisation for systemic enhancements. Policy reforms at the macro level, such as universal coverage and TQM, emphasizes the vital importance of effective governance arrangements and fair resource allocation in improving healthcare delivery. In addition, patient centered care initiatives emphasize the importance of privacy, safety, and personalized interventions, further promoting the importance of the individual patient's experience in the quality improvement equation.

Cross disciplinary methods help fill the chasms between healthcare, public health policies, and leadership of organizations, and provide comprehensive solutions to difficult problems. These are manifestations of the evolving symbiosis of evidence-based metrics, leadership paradigms, and policy architectures designed to promote sustainable healthcare system progress.

In summary, this SLR demonstrates the multifaceted nature of QI in healthcare and the requisite partnership, innovation, and accountability. The implications provide a solid base for further research and practical execution, in bringing healthcare to the international norms of high quality and equitable services.

## References

- (1). Akanksha, Islam, A., Singh, H., Singh, A. P., & Sharma, A. (2023). Q-Marker: An Integrative Approach and Scientific Validation in the Indian System of Medicine. *Current Traditional Medicine*, 9(5), 150-161.
- (2). Alraimi, A. A., & Al-Nashmi, M. M. (2024). The interactive effect of applying the management-centered standards of Joint Commission International (JCI) and practicing administrative control in improving the quality of health services: a study on three Yemeni hospitals seeking accreditation. *Journal of Hospital Management and Health Policy*, 8.
- (3). Erowati, T. I., Herowati, R., Purwidyaningrum, I., Widodo, G. P., Oetari, R. A., Atmadani, R. N., & Rachmawati, H. (2024). Planning and procurement evaluation in 2019-2020 at pharmaceutical installation of X Private Hospital, Sidoarjo, Indonesia. *Journal of Advanced Pharmacy Education and Research*, 14(2-2024), 42-49.
- (4). Fouda, E. A., Peacock, S. H., Mooney, L. H., Veres, D. J., Freeman, W. D., & Porter, S. B. (2023). Bladder Assessment and Management in Acute Stroke Patients. *Journal of Radiology Nursing*, 42(2), 162-165.
- (5). Hashimoto, K., Adrien, L., & Rajkumar, S. (2020). Moving towards universal health coverage in Haiti. *Health Systems & Reform*, 6(1), e1719339.
- (6). Kraus, T. (2021). Virtual Summit on Safe, Effective, and Accessible High-Quality Medicines as a Matter of National Security. *American Journal of Health-System Pharmacy*, 78(6), 511-520.
- (7). Liu, M., Guo, R., Li, J., Wang, C., Yu, L., & Liu, M. (2024). Process indicators outshine outcome measures: assessing hospital quality of care in breast cancer treatment in China. *Scientific Reports*, 14(1), 19137.
- (8). Nasution, F. N., Erlina, Absah, Y., & Rujiman. (2021). TQM and hospitals' performance: a conceptual paper. *International Journal of Business Process Integration and Management*, 10(3-4), 341-354.
- (9). Nazarova, V. V., Nikolaev, N. S., Tarasova, T. S., Dobrovol'skaya, N. Y., & Preobrazhenskaya, E. V. (2022). Using experience during the COVID-19 pandemic to ensure the quality of PCR studies. *Klinicheskaiia Laboratornaia Diagnostika*, 67(11), 678-684.
- (10). Parra, J. O., Muñoz, J. C., Sánchez, G. P. C., & Zamora, G. Z. (2021). Gestión administrativa de las instituciones de educación superior: Universidad Católica de Cuenca-Ecuador. *Revista de ciencias sociales*, 27(1), 347-356.
- (11). Prentice, H. A., Harris, J. E., Sucher, K., Fasig, B. H., Navarro, R. A., Okike, K. M., ... & Paxton, E. W. (2024). Improvements in Quality, Safety and Costs Associated with Use of Implant Registries Within a Health System. *The Joint Commission Journal on Quality and Patient Safety*.
- (12). Ramnarine, E. (2023). Control Strategy: A Feedback-Feedforward 'Controls Hub' for Risk, Knowledge, and Product Lifecycle Management. *Pharmaceutical Technology*, 47(10), 30-46.
- (13). Riemann, M. C., Bailey, S. S., Rubert, N., Barnes, C. E., & Karlen, J. W. (2020). Sonography of Magnetically Controlled Growing Rods: A Quality Initiative in the Creation of a Multidisciplinary Clinic. *Journal of Diagnostic Medical Sonography*, 36(6), 520-528.
- (14). Sohal, A., De Vass, T., Vasquez, T., Bamber, G. J., Bartram, T., & Stanton, P. (2022). Success factors for lean six sigma projects in healthcare. *Journal of Management Control*, 33(2), 215-240.
- (15). Song, X. D., Li, S. X., Qin, Z. M., Chen, D. L., Guo, L. L., Liu, C. R., ... & Dai, E. H. (2024). Ensure the accuracy and consistency of biochemical analyzer test results:

- Chemometrics for instrument and inter-instrument item comparison in Chinese hospital laboratory. *Heliyon*, 10(1).
- (16). Vanhaecht, K., Lachman, P., Van der Auwera, C., Seys, D., Claessens, F., Panella, M., ... & FlaQuM research group. (2024). The “House of Trust”. A framework for quality healthcare and leadership. *F1000Research*, 13.
- (17). Yilmaz, S. A., & Celik, S. S. (2022). Patient privacy: a qualitative study on the views and experiences of nurses and patients. *The Australian Journal of Advanced Nursing*, 39(2), 12-22.