

PREFACE

T*ransformation, disruptive innovation, redesign, reform*—these popular terms all accurately characterize the state of our current healthcare system and its evolution. The changes we are witnessing today are accelerating at a rate that early pioneers in medicine could not have envisioned. All healthcare organizations are facing the challenges of change as they embark on their individual journeys to provide better care, better service, and better overall health for everyone they serve. All organizations are on a different path and have a different destination. However, they all have one commonality: *Quality* is the roadmap. Improving healthcare quality is the essential strategy to survive and thrive in the future. The difference between organizations that are good and those that are great is determined by leadership, and leaders who are masters of quality improvement are the difference makers.

This textbook provides a framework, strategies, and practical tactics to help all healthcare leaders to learn, teach, and lead improvement efforts. This fourth edition has been updated significantly from the previous editions, but once again, it has an all-star list of contributors with incredible expertise and breadth of experience. Like the healthcare field itself, this edition has been improved, reimagined, and redesigned. Organized into four sections, the book focuses on the foundation of healthcare quality (part I); tools, measures, and their applications (part II); culture and leadership (part III); and emerging trends (part IV). Individually, and in aggregate, this book is designed to be both an instructional guide and a conversation starter among all students of healthcare quality—that is, all current and future healthcare professionals.

Part I contains three chapters that together provide a foundation for healthcare quality. In chapter 1, Rebecca C. Jaffe and colleagues provide an overview of major reports and concepts, Donabedian's classic structure-process-outcome framework, and methods and tools for quality improvement. The history and the landscape of quality in healthcare are beautifully narrated by Norbert Goldfield in chapter 2. In chapter 3, David J. Ballard and colleagues examine one of the most pervasive and significant issues in healthcare quality—clinical variation. They explain the concept, distinguish between warranted and unwarranted variation, and discuss quality improvement tools that can help manage and reduce unwarranted variation in medical practice.

Part II of the book builds on the foundation and speaks in-depth to tools, measures, and their applications in the pursuit of quality. John Byrnes, in

chapter 4, articulates how data are the foundation of quality and patient safety and how the effective and efficient collection of data is critical to all strategic endeavors to improve quality. Davis Balestracci, in chapter 5, reveals how to apply the appropriate statistical analyses to make the information meaningful. In chapter 6, Bettina Berman and Richard Jacoby expertly apply data to the physician and provider registry domain as another tool for leveraging information for improvement. Information technology (IT) is an engine that uses data as fuel and, in chapter 7, Sue S. Feldman, Scott E. Buchalter, and Leslie W. Hayes describe how organizations use healthcare IT in a three-part cycle of prevention, identification, and action with data and information. Chapter 8 rounds out part II's focus on applications of data, information, measures, and tools, as Hyunjoo Lee and Dimitrios Papanagnou provide an overview of how simulation, as they say, "can be used to improve healthcare quality and safety by highlighting its intrinsic ability to expose, inform, and improve behaviors that are critical for effective communication and teamwork."

Whereas part II provides a comprehensive view of the measures, tools, and technologies that are needed to improve quality and safety in healthcare moving forward, part III focuses upon what is arguably the key to everything—leadership and culture. To begin this section, Deirdre E. Mylod and Thomas H. Lee, in chapter 9, summarize important aspects of patient satisfaction—a key marker of a patient-centered field. In chapter 10, Craig Clapper, a national expert and teacher in high reliability, reinforces the goals of zero preventable harm and 100 percent appropriate care as cornerstones of a high-reliability culture.

In chapter 11, David Mayer and Anne J. Gunderson trace the history of the education movement by outlining key milestone papers and symposia, signaling that there are still significant gaps in the teaching of education for healthcare quality. Chapter 12, by Michael D. Pugh, exquisitely details the why and how of dashboards and scorecards as critical leadership system tools for improvement and accountability. The final chapter in this section, chapter 13 by Kathryn C. Peisert, describes the fiduciary responsibility of the board of directors and delineates its central role in the quality and safety debate. Ultimately, the boards bear the responsibility for *everything* in the healthcare organization, including quality and safety.

The textbook concludes with part IV—a compilation of chapters that discuss many of the emerging trends in today's fast-paced healthcare environment. Lawrence Ward and Rhea E. Powell, in chapter 14, consider the multitude of approaches to improving quality and safety in the ambulatory setting, providing contemporary insights for driving improvements in the delivery of care in primary care and specialty provider offices, ambulatory surgery centers, urgent care centers, retail clinics, freestanding emergency departments, and work-based clinics. In chapter 15, Michael S. Barr and Frank Micciche provide an overview of the National Committee for Quality Assurance (NCQA), from its initial role in helping employers and health plans develop quality standards to

its present-day work in creating systems to measure those standards, including the Healthcare Effectiveness Data and Information Set (HEDIS) measures, health plan accreditation guidelines, the patient-centered medical home model, and various recognition programs.

In chapter 16, A. Mark Fendrick and Susan Lynne Oesterle present the fundamentals of value-based insurance design, another trend that impacts all healthcare stakeholders. Neil Goldfarb then shows us in chapter 17 how purchasers select and pay for healthcare services with a greater focus on value. Laura Cranston and her colleagues in chapter 18 provide a pharmacy perspective on achieving greater quality and lower cost through effective medication use. Finally, in chapter 19 by Keith Kosel, we review current thinking on population health quality and safety.

Throughout the world, healthcare is changing dramatically. However, that dramatic change will lead to significant advances in patient safety and quality of life only when organizations and healthcare leaders effectively implement quality improvement solutions to our complex problems.

As editors, we use this book extensively, whether for teaching in our courses or as reference material or for research. The most important use is for leading change within our organizations. We greatly appreciate all the feedback we have received thus far to improve the textbook so that we can all be better leaders and healthcare providers.

Please contact us at doctormaulikjoshi@yahoo.com with your feedback on this edition. Your teaching, learning, and leadership are what will ultimately transform healthcare.

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Instructor Resources

This book's Instructor Resources include teaching aids for each chapter, including PowerPoint summaries, answers to the end-of-chapter study questions, and a test bank.

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