

BOOK REVIEW

Moving Beyond Repair: Perfecting Health Care

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Moving Beyond Repair: Perfecting Health Care
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INTRODUCTION

Some experts believe in the achievability of what appears to be a radical proposal: Perfect healthcare (high-value, low-cost, and one with zero error rates). *Moving Beyond Repair: Perfecting Health Care*, edited by Dr. Karen Wolk Feinstein et al. is a book devoted to such proposition. The book suggests a framework that can dramatically change not only the healthcare delivery system of individual organizations but also have the entire US healthcare system transformed safely, efficiently, and effectively. Dr. Feinstein writes mainly from her inside knowledge and experience as President and Chief Executive Officer of the Jewish Healthcare Foundation and its two supporting

organizations, the Pittsburgh Regional Health Initiative (PRHI) and Healthcare Futures (HCF). Upon her appointment in 1990, she embarked on a strategy that completely transformed these two organizations. A leading voice in patient safety, healthcare quality, and workforce issues, Dr. Feinstein is widely regarded as a national leader in healthcare quality improvement. She has authored publications on quality and safety and has taught at Boston College, Carnegie Mellon University, and the University of Pittsburgh. The book makes bold and ambitious claims that the objective of healthcare delivery should proceed from the current forty percent waste and abuse (i.e., 60% services add value) caused by errors, infections, unnecessary treatments and preventable complications to the point where all (100%) services add value. She believes that these can be achieved through the application of industrial engineering methods developed by W. Edwards Deming. These principles known as Lean manufacturing were initially applied at the Toyota Production System and have subsequently found wide application in other industries. The book contains details about PRHI implementation of key principles from Lean theory to develop its own process improvement process called Perfecting Patient

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Care (PPC). Employing some critical success factors, Dr. Feinstein claims that the “successes are building blocks for the real work ahead of healthcare providers: understanding and reinforcing the “systemness” of their activities – across professional specialties, settings, clinical problems, and organizational boundaries – to perfect patient care.” The book is intended for those who manage healthcare systems as well as healthcare providers: Boards, CEOs, CFOs, Mid-managers, Doctors and Nurses. It should be a required reading for everyone involved in the healthcare delivery continuum. However, politicians who are on a perpetual mission of transforming and reforming the healthcare through the force of law should read this and take advantage of the prescription suggested by Dr. Feinstein.

SUMMARY OF THE CONTENT

The book is divided into six sections. Section 1 introduces and describes the PPC methodology and how it works. It also describes how the PPC educational system is delivered to individuals, organizations and groups. Sometimes this is done through classroom settings. This type, called PPC University, is a four-day intensive lecture and interactive delivery platform. In some cases, and for logistical reasons, one-day overview or on-site training programs are offered.

Section 2 documents cases where PPC has been used to repair and correct individual problems that resulted from inefficient and ineffective healthcare delivery. This section contains four essays that narrate real cases where the PPC methods have been used to solve problems. The Allegheny General Hospital’s case describes how PPC methods were used to completely eliminate infections in a hospital for fourteen consecutive months. The repair work was initiated by Dr. Richard Shannon, a PPC Champion, in 2004. The case of St Clair Hospital illustrates how these innovative methods were used to dramatically reduce wait-time and patient satisfaction at the Emergency

Department visit. The third case shows how these processes helped to reduce the rate of Cesarean Section birth from 37% in 2004 to 24% in 2011. The fourth case dealt with how the Jefferson Regional Medical Center applied these methods to improve medication safety. Obviously all these have led to cost savings and improvement of the bottom line in the affected organizations. All these individual successes are considered to be “repair work.” They are not enough, according to Dr. Feinstein. However, real and complete healthcare and organizational overhaul “requires both organizational transformation, along the *xylophone of quality*, and a keen understanding of the network components ...”

Thus, Section 3 of the books describes efforts made by many organizations to completely transform themselves using PPC. Four cases are highlighted and described: Asbury Heights, a senior living community in Pittsburgh, where the design and application of PPC principles culminated in a complete change in attitude, practice, and outlook of staff. The ultimate results are in quality improvement in healthcare as well as in resident and employee satisfaction. In the case of Henry Ford Health System located in Detroit Michigan, the following results, among others, were observed: about 46% reduction of the time by which most laboratory results were available from 13 to 7 hours, 55% reduction of surgical defects after one year and 91% reduction after two years of implementation of PPC. Dr. Richard J. Zarbo, a Senior Vice President and others provided a detailed account of the time, effort, and resources that the organization expended to achieve the above results. East Liberty Family Health Care Center where “problem-solving, systems thinking, continuous improvement and teamwork have all become part of daily operations.” At Sheppard Pratt Health Systems in Towson Maryland, “quality improvement has become a way of life...”

Section 4 contains examples provided to show how healthcare providers have used PPC to transform healthcare systems across organizational entities.

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