**Facilitating Change in Healthcare**

**Key factors driving change in healthcare**

This section covers the main drivers of change in the healthcare sector. The goal of the section is to enumerate the different drivers of change and identify how they could affect the organization. The factors will contribute to the change management initiative that is to be mentioned later in the statement.

**Focus on quality**

 Patients and their families are increasingly looking at healthcare services in terms of quality.  Quality will depend on the user. However, there is some basic aspect that has to be attained as far as quality is concerned.  Quality is an attribute of the service (Spath, 2009). Any social and healthcare services provider will have to consider quality as an attribute of the service itself. The focus on quality can be assessed based on order qualifiers and winners (Beuran et al., 2014). Order qualifiers are the basic aspects that have to be attained in an organization.  The order winners are the aspects of a service provider that make the user choose the provider as opposed to the competitor. The quality focus in any healthcare organization ought to be on attainment of the basic requirements for them to be qualified for consideration and the winners. Additional perks will ensure that the service provision is ranked high among the patient choices and priorities.

**Cost**

In the recent past, there has been a focus on change management in healthcare organizations with the main aim being the reduction of cost. It is important to note that some of the changes in an organization will be dependent on the cost aspect. However, there is also a trade-off as far as quality is concerned. More customers are focused on the cost aspect while hoping for some level of quality in terms of the service delivery. Therefore, when considering the cost of effecting change, it is important to ensure that the quality of the services delivered is not compromised. Finding the best trade-off in the change effecting has been the main focus. This will affect future engagements in the client’s target changes.

**Customer satisfaction**

 Any change engagement ought to be informed by the customers’ needs. Some of the customers will be looking for the best service provider. The best service provider is the one who is capable of meeting their needs.  Hence being able to meet the needs of the customers is ideal in that it defines the referral rates to the healthcare organisation as well as the liability limitation. Change in the healthcare sector will be more aligned to the customer satisfaction. It is important to consider the satisfiers in the healthcare organisations.  In the event that there is low customer satisfaction, there will be an increased in the number of patients who voluntarily decline healthcare services provided by the organization.  Satisfiers in the healthcare organisations will have to be considered in order for the healthcare engagement to be effective. Focus on the satisfiers is ideal in that there is a high probability of improving on them in a continuous manner (McFadden, Stock,and Gowen, 2015).  Some of the common dissatisfies that are heightened in research include the long wait, customer, and family interaction with the staff as well as the costs of the medication. Finding the best way of improving the dissatisfiers will increase the possibility of the patients retiring to the facility and reduce the possibility of declination of care by the patients.

**Need for continuous improvement**

This is a key factor in change management. Hospitals and other healthcare organizations have to consider the possibility of improving the overall healthcare on a continuous basis. Continuous improvement is a major factor in change management in that organisations have to be based on the understanding that there is always room for improvement. Being at the top of the industry may not indicate the attainment of a ceiling. There is always a possibility of pushing the limits and changing it with time. Continuous improvement is holistic in nature.

**Presentation content**

The section covers major points that will be sued in the meeting with the SMG officers in the organization. The content is based on the previously identified key factors effective in impacting change in the healthcare sector.

**Focus on quality**

The focus on quality has been an effective tool in effecting change in any organization. Major healthcare organizations are based on quality measures such as patient outcomes, chances of readmission, the fall reduction, overall treatment of the families and liability limitation. Being an effective healthcare organization have to be hinged on the ability to meet the expectation of both the patients and their families.

There are some challenges related to quality. Focusing on quality management as a part of larger change management initiative may pose some limitations to the organization.  Quality improvement is often linked to hiking costs. Patients may not be in agreement with an overall increase in their costs of health care.  Secondly, the quality parameters differ. These different parameters may be the order winners. Hence, it is difficult for an organization to be effective in meeting all order winners as far as quality management is concerned.

**Cost**

The cost of healthcare will impact the change management. As far as cost is concerned, the organization has to consider the possibility of the overall cost reduction initiative impacting the quality. The tradeoff approach can result in a negative image of the organization. The costs can also be reduced to some extent (Wellman, Jeffries and Hagan, 2016). This means that the organization may be focused on change touching on cost, but if it exceeds a certain limit in the cost reduction imitative, it will end up losing the gains made in other factors.

**Customer satisfaction**

Customer satisfaction is a construct of both cost quality, speed,and dependability of healthcare provision (Al-Abri and Al-Balushi,  2014).  It is difficult for any organization to meet all satisfiers for an organization. The ideal organization will be able to do so. However, there are many variables at work as far as customer satisfaction is concerned.

**Continuous improvement**

Continuous improvement is an integral part of change management. However, it is a strategic aspect. The senior management has to be ready to commit the funds for continuous improvement based on the feedback from actual workers in the different departments. Competing interests often relegate continuous improvement to the background such that change is only effected too late as opposed to being created in an anticipatory manner.

**Challenges**

Change management is informed by various factors. As far as change management is concerned, there are four factors that ought to be considered (Bohmer, 2016). These factors are speed, dependability, quality as well as cost. All of these factors ought to be improved in a simultaneous manner since the focus on one tends to affect the other negatively. In as much as the conventional way thinking as far as change management has been leaning more towards the improvement of all factors in the same time, there has been a lot of trade-off in the healthcare provision.

Healthcare organizations have been focusing more on quality as a measure of improvement or change in their operations. The focus on quality is ideal in that quality can be the determinant of the ranking of the hospital in the end.  However, quality is expensive to effect. Focusing on the overall improvement on quality could be ideal in that an organization will be capable of meeting the needs of the patients.

 Pure focus on quality may result in high level of dissatisfaction. This is due to the aspect that quality is largely subjective. What can be termed as a quality initiative in one patient engagement incidence may not be considered the same. Therefore, the organization will have to focus on the order qualifies. These are the minimum requirements that a hospital ought to provide. The order winners can prove to be challenging. Most of the order qualifiers are dependent on the patients (Langabeer and Helton, 2015). It is almost impossible to meet the need of all patients at the same time. With this factor in mind, an ideal organization will be focusing more on the training of the care providers such that they can adjust their care provision focus to suit the needs of the patients (Jaber, 2016). However, even with this focus, the patients may end up dissatisfied since there is a myriad of satisfiers under this categorization.

The cost aspect is also a major challenge as far as healthcare change is concerned. Some of the changes in an organization will cost the company more to effect. These changes could be ideal, but the budgetary constraints could limit the effecting of such changes. In most cases, a focus on change can result in the overburdening of the patients. This will affect the preference of the healthcare organization. In the end, the best approach will be a balancing act.

Customer satisfaction is largely vague. The customers can be satisfied by different things. However the main satisfiers which are the patient outcomes can be attained (Boyce, Browne and Greenhalgh, J., 2014). However, the additional or peripheral services can determine if the customers are satisfied. All of the peripheral services are often too much to attain. In the end, the ideal way to attain these satisfiers is expensive and customized. Customized care could be appealing to the patients, but it does not necessarily result in the best operating plan for the organization. Hence, a tradeoff will have to be made at the end.

Continuous improvement is the ideal way of ensuring that there is effective change management in the organization. However, some of the organizations tend to focus more factors in addition to the continuous improvement. This is a strategic focus for any organization. It also has to be factored into the organizational culture (Borkowski, 2015). In the event that there is no focus on continuous improvement, the organization will have to consider it. This calls for dedication from the top management and a change of the overall organizational culture.

**Task 2**

The proposed strategy for effecting change in the organization will be focusing on quality.  Over the past years, there has been an increase in attendance with the main focus being the overall improvement of quality. The main focus has been on the measuring of quality in the healthcare system. The accreditation has been the main driver of the development of skills and technologies that can be the seed to increase performance (Shaw et al., 2014). Some of the common applications in the healthcare have focused on total quality management as well as continuous improvement of quality. These aspects are the main tools used for the improvement of the quality of healthcare.

 In addition to the accreditation, the recent changes have been measuring the performance of the health system. This has contributed to the assessment of the national health systems.  The main dimension measured in the healthcare system include the overall effectiveness as well as the efficiency. Customer satisfaction has also received attention as far as a quality improvement as part of overall change management (Tricco et al., 2014). Therefore, it is imperative that the performance measurement is a major consideration for the health care providers. It is also applied in a larger context. There are some gaps as far as the type of key performance indicators is concerned.  The section of the report provides both the strategy of overall quality improvement in an organization as well as the key performance indicators to be used (Secanell et al., 2014). The performance indicators will be used to measure the effectiveness of the strategy as it relates to health and social care areas.

The assessment of the quality of care in the organization will entail the observation of the numerous criteria. One of the criteria to be used in the assessment of quality will be the structure. Structure as far as quality of care is concerned touches on the characteristics of the healthcare providers. These characteristics include the planning and systems of care delivery. This is the overall order which is used in the assessment of care in an organization. The second aspect will be the access to services. The access to services entails down times in care delivery, availability of a myriad of facilities for care providers and patients and the frequency in which the system is available for the patients. The aspect of the structure includes the safety and policies procedures (Carayon, 2016). The policies procedure will focus on hospital-acquired infections, overall security measures,and fall prevention in the hospital context.  The second criterion to be used in the assessment of change will be the processes. The processes entail diagnosis accuracy, interpersonal aspects of care delivery, professionalism, diseases management and availability of preventive care (Zingg et al., 2015). The final criterion in the assessment of care will be the clinical outcomes. Clinical outcomes focus on the effectiveness of the prognosis.

Clinical outcomes are the results of the diagnostic procedures and/or the treatment. The outcomes are long-term in nature. Hence, the change management initiative assessed based on the following criterion will be conducted on a long-term basis. A retrospective analysis will also be used to analyze the standing of the organization as far as the following criterion of the strategy is concerned.

**Measurement of impact**

The structure has been advanced and an ideal measure of the quality of care in a hospital setting. Most of the hospitals have focused on the development of facilities and resources that will be ideal for the attainment of optimal quality as far as care is concerned.  Given that structure is an integral consideration as far as quality of care is concerned, the modern health and social care organizations have been focusing on the improvement of the characteristics of the healthcare system.  Organisation of care has been a major aspect of the assessment of structure. The major health and social care organizations have been creating an organization system based on process streamlining to ensure that the patients have the best care possible. The physical layout is an integral part of process streamlining (Graban, 2016).

 Structure focus has also entailed a focus on the creation of an accessible system of care. This build on to the system of care as a characteristic of the health care system. Most of the hospitals have collaborated with various partners such as ambulance services to ensure that they are accessible to all. Accessibility of services in the healthcare system also has a cost component. The ideal organization has been focusing on the provision of high quality of care while ensuring that the patients do not have to incur significant costs in the process.  Accessibility includes acceptance of a variety of insurance cover (National Academies of Sciences, Engineering, and Medicine, 2016).

 The process of care delivery has also impacted the changes in the healthcare sector focusing on the quality of care.  Organisations in the healthcare sector have been focusing on the identification of the ideal evaluation process of care. The evaluation of the care process entails the assessment of the overall effectiveness of the management of the diseases. An ideal organization has to have a screening area which is the first consideration before a patient is admitted to a hospital. Screening is ideal in that it reduces the chances of a patient getting hospital-acquired infections.  Other process measures that have been measured as far as change management in the healthcare sector is concerned to include the accuracy of the diagnosis and the fitness of the therapy. A hospital will be deemed to have a high quality of care if it has a high rate of accuracy in diagnosing infections and uses the best prognosis to come up with the best outcomes.  Interpersonal aspects such as care from the nurses, while one is admitted, are major measures of quality that have informed quality focused change initiatives.

Clinical outcomes have also been used in the assessment of changes. Hospitals tend to focus on patient outcomes. However, in as much as there is an increased interest in patient outcomes as measures of quality in the healthcare sector, the focus has been leaning more towards the processes. Critics of the use of patient outcomes as measures of quality of care argue that if the processes were followed, the outcomes should come later since there are other factors that could inform how the patient outcomes develop (Lindenauer et al., 2014). The single approach based on the application of one of the three criteria mentioned above has been less effective in providing the ideal image of how the organization is performing as far as quality of care is concerned.

**Evaluation of overall impact of changes**

The impact of the changes based on the three criteria mentioned above has been marked as far as quality is concerned in the care providing organizations.  All the criteria have been mentioned in studies as major drivers of the strategies for ensuring that there are effectiveness and efficiency in care delivery. These are the main goals as far as care provision in healthcare organizations is concerned.

The hospitals have been focusing more on the development of a structure that will contribute to the overall attainment of quality of care (Mosadeghrad, 2014). The structural aspects have been used in the past to ensure that there is adequate accessibility, safety, and capacity to ensure that the organization is both effective and efficient in the provision of care to all patients. Numerous organizations have been focusing on the development of a system of care that will be ideal for the provision of adequate care to all patients.

The overall focus on structure as a measure of how the quality of care is provided in an organizational setting has impacted the design considerations. For instance, there are changes to organizations to ensure that the patients have the direct access to their doctors. Hospitals have been going as far as providing ambulance services for the recurring patients. All of these efforts are meant to ensure that the patients have access to services. Another aspect of the focus on structural issues includes the development of pro bono services which are meant to ensure that the underserved populations have access to medical care. Safety and policy procedures have also been improved in the majority of hospitals (Carayon et al., 2014). For instance, there has been an effort to reduce the overall number or incidence of falls in hospitals. All of these structural issues are meant to ensure that the organization has the highest level of efficiency and effectiveness as far as care provision is concerned.

The process-based changes in the healthcare industry have been improved as part of the improvement of the overall quality of services and retaining competitive advantage (Bloom et al., 2015).  Organisations have been focusing on the creation of databases which asset in the disease management. The historical data in the databases contribute to the decisions touching on diagnosis and treatment therapies.  A major change that has been noticed in the healthcare sector include the development of the interpersonal capabilities of the hospital workers. More hospitals are training their staff such that they improve their interpersonal aspects. This draws from the psychological research that the interpersonal aspects are major determinants in the recovery time as well as the overall healing time.

 The combination of structural and process aspects of quality care has a bearing on the patient outcomes. This is the most common measure of the healthcare effectiveness. Hospitals have been focusing more on the development of structure and creation of ideal processes in order to improve the quality of care. There has also been a marked resistance to the reliance on the patient or clinical outcomes as the main measures of the quality of care. The holistic approach has been advanced and the ideal measure.

**Appropriate service responses**

It is suggested that there is an increment in the quality of care by effecting a number of changes in the overall operations of the organization.  The criteria to be used in the assessment of the effectiveness of the overall strategy has to be considered. The following recommendations can be effected in full or partially to ensure that overall quality is improved.

 The organization ought to consider increasing access to services. The digital revolution has also touched in the healthcare sector with some innovations increasing access to medical care. The technologies can also assist in collaboration of information between hospitals. Any patient transferring from a given region can have his or her medical information uploaded to the system had access medical care in an instant.

The quality management changes have also focused on the development of better safety policies and procedures. The patients ought to feel secure in the facility. The organization can consider the improvement of safety,especially when covering some aspects such as fall prevention. The safety procedures also ought to be made in consideration of the high-risk patients too. Development of special facilities such as isolation wards and locked psychiatric unit would be assumed with immediacy.

In addition to the increase of access as well as safety, the hospital ought to have special mobility physical attributes.  The hospital ought to be fitted with special ramps for overall increment in access. The ramps can be sued for moving unconscious patients and during the times of special needs. These proposed changes as far as structure is concerned will have a bearing on the overall quality of the organization.

In addition to focusing on the structural issues, the change management with a view to improving quality of care ought to consider the process improvement. The disease management ought to be considered. This will call for the inclusion of the management of diseases. The hospital ought to hire the most qualified caregivers who are going to be instrumental in the process management.  There should be procedural measures focusing on disease screening before admission. This will help in the determination of the exposure to other patients. The above consideration will ensure that there is little contact with hospital-acquired infections touching on the patients.  The screening process ought to be combined with other preventive approaches.

There should also be a focus on the attainment of accurate diagnoses. The tatter ought to be 100% accuracy. In order to attain this, the hospital ought to have highly qualified staff. Redundant measures ought to be considered too when coming up with the diagnosis.  A common approach entails inclosing the opinion of senior doctors. This approach ensures that the diagnosis received and the prognosis will be accurate enough for the medical professionals. Other measures include improvement of the interpersonal aspects as far as service delivery is concerned.  All care processes ought to be coordinated resulting in the anticipated patient outcomes at all times. Implementation of all of the above recommendations can improve the overall quality of care. This will respond to the changes in care delivery in the entire organization.

**Task 3**

Various principles can be applied to the overall change management initiatives.  However, there are some principles that ought to be considered first as far as change management is concerned. These principles apply to all organizations regardless of the sector in which the specific organization operates.  Change management can be attained through an overall change in culture, the involvement of all players, seeking a commitment from the top management and development of formal solutions.

The main way of attaining a change in any organization entails changing the culture (Borkowski, 2015).  If the change is to be attained, the cultural aspects will have to be considered since the people can assume that the change is the new way of doing things. Hence, if an organization is to be successful in effecting any change, it has to consider how the culture plays into the overall plan.

Still, in line with the effecting change based on culture, an organization ought to consider formal solutions first. Culture has both formal and informal elements. However, the organizational culture is largely informal. In as much as the informal aspects of culture play a big role, the organization ought to consider formal solutions first.  Formal aspects can entail the compensation, training,and development as well as the overall contribution from the trained individuals.  There should be formal mechanisms in play to ensure that the change managers are motivated. The change agents such as the workers also have to be recognized for their efforts in implementing the overall change. Hence, an ideal organization will be the ones that consider culture as well as formal solutions when managing change.

The third principle to be considered when effecting change in the organization is engagement. Leaders make the mistake of starting a change initiative on their own. This may work for some time. However, the change plan tends to be foreign to the workers. The workers are the ones who are supposed to be implementing the change plan. Hence, in any change management initiative, the leaders have to consider the input from the workers themselves (Gopee and Galloway, 2017).  Engagement ought to be ongoing in nature. The planning state calls for most engagement. The simple act of considering the insights from the workers can have large impacts on the overall effectiveness of the change management plan.  Engagement should be used to acquire feedback on how far the organization is going as far as change is concerned. If an organization is in constant communication with all members as far as change is concerned, it will be likely to increase the success (Kash et al., 2014).  The fences that tend to differentiate the cadres of management ought to be torn down.

The change management can be less effective if the top management is not involved. The top management should not be the originators of change per se, but it should be willing to go along with the proposed changes. In this case, the top management goodwill is largely effective as far as the development of change initiatives is concerned. Ideally, the organization ought to be effecting change based on the support from the top managers.

**Planning for change**

In order to attain change, there is a need for the organization to plan. Change management is a strategic aspect. An organization has to consider the long-term nature of change. Most of the changes that are effected in an organization have to be created based on the long-term goals. Ideally, an organization can focus on change based on the end results. For the SMG, the change management is focused on the overall improvement of the quality of care in the hospital focusing on performance indicators such as patient outcomes, processes,and structures within the organization.

The first step in planning for change is creating a strategic plan. A strategic plan is long-term in nature. The strategic plan ought to have the mission and vision.  Ideally, the strategic plan ought to cover two years.  The planning timeline ought to be defined in order for the plan to be implemented. The project management techniques can be used in ensuring that the change is attained in the long run.

The second step in planning is data collection.  The information gathering process calls for situational analysis. It is important to consider the external and internal environment. PEST analysis can be used for external environment analysis while SWOT analysis can be used in analyzing the internal environment.  The situational audit will call for the analysis of the organization. The audit will result in the identification of weakness, threats, opportunities and strengths in an organization.

 The third step in planning will entail decision making. Once the organization has understood how the environment functions, the information collected is used in making decisions.  The decisions have to be in line with the strategic direction of the organization as well as the priorities.  The influencing factors ought to be the ability of the organization to have positive change after taking the decisions.

The fourth step is the creation of the actual plan for change. After the establishment of the strategic priorities, the top management has to come up with the plan which outlines the proxies and any other needs that are to be considered. These needs could include the hiring new staff to oversee the requirements.  The plan has to be approved by the board. Stakeholder approach has to be adopted when deciding on a change plan. The non-biased stakeholders ought to be consulted since most of these plans will affect them directly.

 The final step entails implementation of the plan. With the review of the plan by the board, the plan can be implemented. The implementation also entails the monitoring process. Monitoring of the plan ought to be checked against major performance indicators (Carinci et al., 2015).  The direction ought to be maintained at all times. The board ought to monitor the direction of the plan. It is imperative to review the plans regularly. This ensures that the organization is on the right track as far as the strategic plan is concerned.  If need be, there should be adjustments to the plan in order to ensure that the strategic objectives of the organization are attained at all times.

**Monitoring changes**

Any change management plan has to be monitored on a regular basis. Monitoring of change entails observation of the change on an ongoing basis. Monitoring of changes in the organization ought to be based on the data collected by the oversight authority. In this case, the board ought to ask for data relating to the quality of care in health and social care. There would be a robust system of measures to allow access to immediate, meaningful and current data.

Monitoring of the effectiveness of the change initiative also has to consider the system vela measures. The system levels measures will entail the reduction in deaths that can be avoided. This is a measure of quality since mortality rates are often referred to when measuring the effectiveness of the healthcare system.  The system level changes will also consider the number of people who are leading a healthy life after being in contact with the organization.

The monitoring process will also over the proxies for improved care. Some of the proxies that can be used in the mentoring of the effectiveness of the change plan include the length of stays in the hospital as well as the adverse events (Ginter, Duncan and Swayne, 2018). The length of hospital stay can be increased due to the contact of a patient with contaminants. The hospital acquired infections often contribute to the overall stay in hospitals. They are also damaging the image of the hospital as an ideal quality care provider.

The hospital is part of a community. The mentoring aspect will also cover issues such as the personal clinical costumes. The patients that pass through the organization ought to be treated in a way that will improve the overall outcomes.  The patients ought to be able to lead healthy and better life. The life quality of all patients served in the community will contribute to the overall assessment of the community wellbeing.  The community also has to be equipped to deal with the common issues that affect their ways of life.

The next minoring consideration will be on resource utilization.  There should be a balance between the financial input and the staff that are employed. It is important to hire the most qualified professionals to ensure that there is quality care delivery. However, the budget allocation ought to be adequate to ensure that there is the sustainability of the overall business operations.  The third tool to be used in assessing change includes the nature of organizational processes.  The processes ought to totube of high quality such that they can support the people centered service delivery. Some of theorganisational processes to be considered include the improvement of accessibility to care, thetransition from care providers and reconciliation of numerous medications. The final element to be monitored is the user experience. Ideally, the users have to post positivefeedback on their experience once they were admitted to the hospital.  Some of the factors that can be used in the assessment of patient experiences include sharing of information, collaborative decision making and constant communication withthe patient and the family.

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