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Article 1

From the Editor

Welcome!

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From the Editor

Welcome!

Welcome to the inaugural issue of the Thomas Jefferson University (TJU)/Jefferson Health System Health Policy Newsletter. The lineage of this newsletter can be traced to 1990 when the Thomas Jefferson University Department of Health Policy and Clinical Outcomes began a thrice annual distribution of a modest newsletter depicting campus wide activities in health policy. In those days, we defined health policy in the broadest possible terms to include health services research activities on our campus as well as the social and economic implications of scientific advances in the basic sciences and clinical medicine. For nearly eight years, the Health Policy Newsletter reached a limited audience on the Center City Campus of what is now the TJU/Jefferson Health System, as well as a select mailing list of persons external to the system interested in our progress. With the rapid expansion of the system itself, especially over the last two years, the members of the editorial board joined me in our desire to reach as many members of our system as possible.

As a result of this desire, and with the enthusiastic support of the senior leadership of the system, most especially, Mr. Doug Peters, the Chief Executive Officer and Dean Joseph S. Gonnella, we are able to bring you this inaugural issue of the Health Policy Newsletter for 1998. We are also indebted to SmithKline Beecham and Hoechst Marion Roussel for their unrestricted educational grants enabling us to partially defray the cost involved in expanding our distribution from 4,000 persons to nearly triple that number.

Given this expansion in our circulation, what impact will this have on our original mission? The editorial board joins me in reaffirming our mission statement, that is, to provide a forum for the exchange of ideas and research that further the goals of TJU /Jefferson Health System. We intend to canvas the System and bring you stimulating articles of a broad nature that will interest clinicians, researchers, administrators, and trainees at all points in the medical education spectrum. Indeed, we are all learners in medicine.

To accomplish this mission, I asked all of the institutional chief executive officers to nominate candidates for our expanded board. I am very proud to introduce a cadre of individuals on our masthead who bring with them expertise from all corners of TJU and the System. This expertise is represented by practicing physicians, epidemiologists, health services researchers, experts in medical education, and persons with leadership responsibilities in rehabilitation, emergency medicine, and senior services. We are ably served by members of the Department of Health Policy, including our managing editor, Susan Howell, and colleagues Barbara Bozarth and Elizabeth Lopez. Three times a year January, September, and May - we hope to bring you reports about activities across the System that are important to the research, education, and patient care missions that we all subscribe to.

Past issues of the newsletter have included articles concerning the growth of one of our physician hospital organizations (PHO) and the challenges of coordinating our data requirements. Others have focused on the nascent Jefferson Healthcare College and the need to educate all members of the System about managed care and its

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impact on physician practices. Still other articles have served as a summary of recent research, especially research concerned with the changing healthcare environment and its effect, for example, on the specialty selection of students and residents. We aim to expand upon these past messages and, with your help and the able assistance of our editorial board, bring you articles that will be stimulating as well as informative. Indeed, currently, no single System-wide publication exists that is focused on our current and hoped-for accomplishments. We are not presumptuous enough to believe that we can summarize all of the activities in three short publications annually, but we understand that this is a first step toward bringing us all closer together.

What do the pundits agree as to the challenges we may face in the future as our System matures? My reading of the "integration literature" distills into at least four major areas, including the following:

- the transition from a focus on covered lives, to accountability for the community population at large¹
- an understanding that "no measurement means no mission"
- effective governance structures that respect the individual components yet are continually focused on the needs of the system
- a reaffirmation that clinical integration is the most important core capability because it is where the ultimate value is added for the consumer. While there are many barriers to clinical integration perhaps the most vexing impediment remains unexplained clinical variation in practice procedures and outcomes.

We'll have much more to say about these four challenges over the course of the next few years. We are cognizant of the fine line we will tread between news for public affairs consumption and an unvarnished look at activities central to the mission of the System through the filter of the editorial board. I am glad I can count on their expert help.

I hope you'll join me individually and collectively as the Newsletter matures. Our past years of publication have been characterized by growth in the number and depth of our articles. Our readership often writes to us with new ideas and challenges us to sharpen our focus and our thinking. I would like to ask all of our new readers to communicate with us as well. Send us your article ideas, your praise, and of course, your suggestions for improvement. In the spirit of continuous quality improvement, we include the enclosed Readership Survey, which we hope you will take a moment to complete. Your reply will also help us learn more about who are new System-wide readers are.

On a final note, let's continue the dialogue necessary for integration. Despite some recent evidence that integration alone does not guarantee a successful future or necessarily conserve resources, the concept itself of integrated systems is not flawed.² Rather, I believe it is the execution that is the challenge. It is my hope that 1998 will see us working closely toward achieving our System goals. We look forward to hearing from you.

- David B. Nash, MD, Editor

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References

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2. Conrad DA, Shortell SM. Integrated health systems: promise and performance. *Frontiers of Health Service Management* 13:3-40, 1996.