

Quality and Quality Improvement in Healthcare

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1.
Catchpole, K. R. A multicenter trial of aviation-style training for surgical teams. *Journal of patient Safety* **6**, (2010).

 2.
Smith, C. D. et al. Re-Engineering the Operating Room Using Variability Methodology to Improve Health Care Value. *Journal of the American College of Surgeons* **216**, 559-568 (2013).

 3.
Effect of a 'Lean' intervention to improve safety processes and outcomes on a surgical emergency unit. *BMJ* **341**, c6435-c6435 (2010).

 4.
BEVAN, G. & HOOD, C. WHAT'S MEASURED IS WHAT MATTERS: TARGETS AND GAMING IN THE ENGLISH PUBLIC HEALTH CARE SYSTEM. *Public Administration* **84**, 517-538 (2006).

 5.
Dixon-Woods, M., Yeung, K. & Bosk, C. L. Why is UK medicine no longer a self-regulating profession? The role of scandals involving "bad apple" doctors. *Social Science & Medicine* **73**, 1452-1459 (2011).

 - 6.

McLaughlin, K., Osborne, S. P. & Ferlie, E. New public management: current trends and future prospects. (Routledge, 2002).

7.

Gabe, J., Exworthy, M., Jones, I. R. & Smith, G. Towards a Sociology of Disclosure: The Case of Surgical Performance. *Sociology Compass* **6**, 908–922 (2012).

8.

How to Determine the Best Interventions for Clinical Quality Improvement Projects.
<https://www.healthcatalyst.com/best-clinical-interventions>.

9.

Dena M Bravata. *Methods*. (2007).

10.

Result List: (SO (Harvard business review.))AND(DT 2000)AND(TI "communities...":
EBSCOhost.
[http://web.b.ebscohost.com/ehost/results?sid=044469a5-943a-44be-96c4-1e3a9c6de052%40sessionmgr120&vid=0&hid=124&bquery=\(SO+\(Harvard+business+review.\)\)AND\(DT+2000\)AND\(TI+%22communities+of+practice%3a+the+organizational+frontier%22\)&bdata=JmRiPWJ1aCZ0eXBIPTEmc2l0ZT1laG9zdC1saXZl](http://web.b.ebscohost.com/ehost/results?sid=044469a5-943a-44be-96c4-1e3a9c6de052%40sessionmgr120&vid=0&hid=124&bquery=(SO+(Harvard+business+review.))AND(DT+2000)AND(TI+%22communities+of+practice%3a+the+organizational+frontier%22)&bdata=JmRiPWJ1aCZ0eXBIPTEmc2l0ZT1laG9zdC1saXZl).

11.

Bate, S.P. & Robert, G. Knowledge management and communities of practice in the private sector: lessons for modernizing the National Health Service in England and Wales. *Public Administration* **80**, 643–663 (2002).

12.

Aveling, E., Martin, G., Armstrong, N., Banerjee, J. & Dixon-Woods, M. Quality improvement through clinical communities: eight lessons for practice. *Journal of Health Organization and Management* **26**, 158–174 (2012).

13.

NADEEM, E., OLIN, S. S., HILL, L. C., HOAGWOOD, K. E. & HORWITZ, S. M. Understanding the Components of Quality Improvement Collaboratives: A Systematic Literature Review. *Milbank Quarterly* **91**, 354–394 (2013).

14.

Quality Measurement: Beginner's Guide to Performance Quality Improvement Using the Model for Improvement - ClinicalKey.
<https://www.clinicalkey.com/#!/content/playContent/1-s2.0-S1546144014005110?returnurl=null&referrer=null>.

15.

Institute for Healthcare Improvement: How to Improve.
<http://www.ihl.org/resources/Pages/HowtoImprove/default.aspx>.

16.

Siri Steinmo. Characterising an implementation intervention in terms of behaviour change techniques and theory: the 'Sepsis Six' clinical care bundle. *Implementation Science : IS* **10**, (2015).

17.

James Cane. Validation of the theoretical domains framework for use in behaviour change and implementation research. *Implementation Science : IS* **7**, (2012).

18.

Siri H. Steinmo. Bridging the gap between pragmatic intervention design and theory: using behavioural science tools to modify an existing quality improvement programme to implement "Sepsis Six". *Implementation Science : IS* **11**, (2015).

19.

Michie, S., van Stralen, M. M. & West, R. The behaviour change wheel: A new method for characterising and designing behaviour change interventions. *Implementation Science* **6**, (2011).

20.

Benneyan, J. C. Statistical process control as a tool for research and healthcare improvement. *Quality and Safety in Health Care* **12**, 458–464 (2003).

21.

But the Limits Are Too Wide! | Quality Digest.
<https://www.qualitydigest.com/inside/quality-insider-column/limits-are-too-wide.html>.

22.

Iyer, S. B., Schubert, C. J., Schoettker, P. J. & Reeves, S. D. Use of Quality-Improvement Methods to Improve Timeliness of Analgesic Delivery. *PEDIATRICS* **127**, e219–e225 (2011).

23.

Mohammed, M. A. Using statistical process control to improve the quality of health care. *Quality and Safety in Health Care* **13**, 243–245 (2004).

24.

Thor, J. et al. Application of statistical process control in healthcare improvement: systematic review. *Quality and Safety in Health Care* **16**, 387–399 (2007).

25.

Mary Dixon-Woods. Explaining Matching Michigan: an ethnographic study of a patient safety program. *Implementation Science : IS* **8**, (2013).

26.

Dixon-Woods, M., McNicol, S. & Martin, G. Ten challenges in improving quality in healthcare: lessons from the Health Foundation's programme evaluations and relevant literature: Table 1. *BMJ Quality & Safety* **21**, 876–884 (2012).

27.

Plsek, P. E. & Greenhalgh, T. Complexity science: The challenge of complexity in health care. *BMJ* **323**, 625–628 (2001).

28.

Laura J Damschroder. Fostering implementation of health services research findings into practice: a consolidated framework for advancing implementation science. *Implementation Science: IS* **4**, (2009).

29.

Perspectives on context | The Health Foundation.
<http://www.health.org.uk/publication/perspectives-context>.

30.

Goodman, D. et al. Explanation and elaboration of the SQUIRE (Standards for Quality Improvement Reporting Excellence) Guidelines, V.2.0: examples of SQUIRE elements in the healthcare improvement literature. *BMJ Quality & Safety* **25**, e7–e7 (2016).

31.

Hoffmann, T. C. et al. Better reporting of interventions: template for intervention description and replication (TIDieR) checklist and guide. *BMJ* **348**, g1687–g1687 (2014).

32.

Ogrinc, G. et al. SQUIRE 2.0 (: revised publication guidelines from a detailed consensus process: Table 1. *BMJ Quality & Safety* **25**, 986–992 (2016).

33.

Kaplan, H. C., Provost, L. P., Froehle, C. M. & Margolis, P. A. The Model for Understanding Success in Quality (MUSIQ): building a theory of context in healthcare quality improvement. *BMJ Quality & Safety* **21**, 13–20 (2012).

34.

Evaluation: what to consider | The Health Foundation.
<http://www.health.org.uk/publication/evaluation-what-consider>.

35.

Loes M T Schouten. Evidence for the impact of quality improvement collaboratives: systematic review. *BMJ : British Medical Journal* **336**, (2008).

36.

Power, M. et al. Reducing *Clostridium difficile* infection in acute care by using an improvement collaborative. *BMJ* **341**, c3359–c3359 (2010).

37.

Maxine Power. Did a quality improvement collaborative make stroke care better? A cluster randomized trial. *Implementation Science : IS* **9**, (2014).

38.

Power, M. et al. Multimethod study of a large-scale programme to improve patient safety using a harm-free care approach. *BMJ Open* **6**, (2016).

39.

Pam Carter. How collaborative are quality improvement collaboratives: a qualitative study in stroke care. *Implementation Science : IS* **9**, (2014).

40.

Perla, R. J., Provost, L. P. & Parry, G. J. Seven Propositions of the Science of Improvement. *Quality Management in Health Care* **22**, 170–186 (2013).

41.

Hammersley, M. & Atkinson, P. *Ethnography: principles in practice*. (Routledge, 2007).

42.

Bryman, A. Social research methods. (Oxford University Press, 2012).

43.

Waring, J., Harrison, S. & McDonald, R. A culture of safety or coping? Ritualistic behaviours in the operating theatre. *Journal of Health Services Research & Policy* **12**, 3–9 (2007).

44.

Trisha Greenhalgh. Diffusion of Innovations in Service Organizations: Systematic Review and Recommendations. *The Milbank Quarterly* **82**, (2004).

45.

Buchanan, D. et al. No going back: A review of the literature on sustaining organizational change. *International Journal of Management Reviews* **7**, 189–205 (2005).

46.

The Spread and Sustainability of QI in Healthcare : Quality Improvement – East London NHS Foundation Trust.
<https://qi.eft.nhs.uk/resource/the-spread-and-sustainability-of-qi-in-healthcare/>.

47.

Sutcliffe, K. M., Paine, L. & Pronovost, P. J. Re-examining high reliability: actively organising for safety. *BMJ Quality & Safety* **26**, 248–251 (2017).