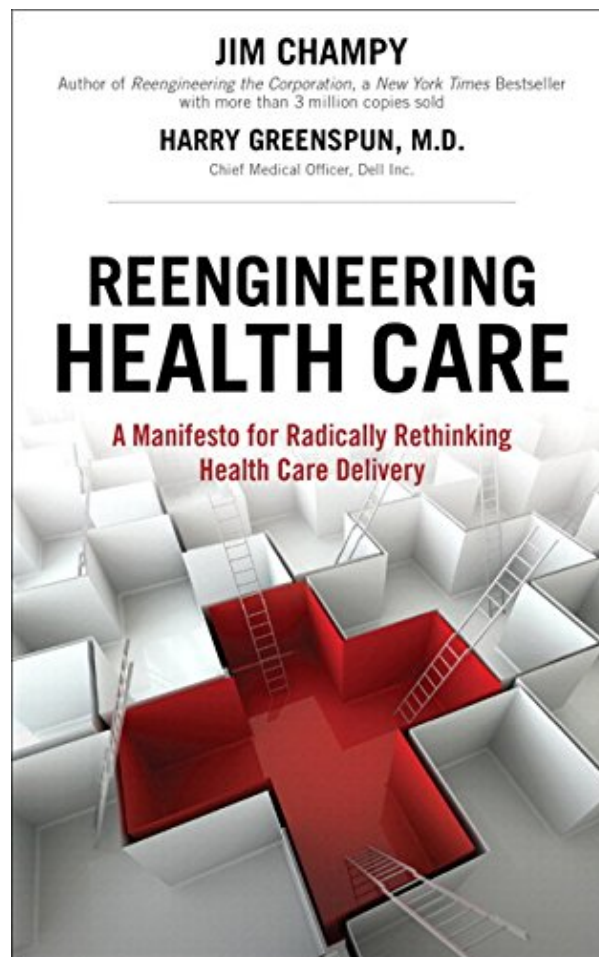


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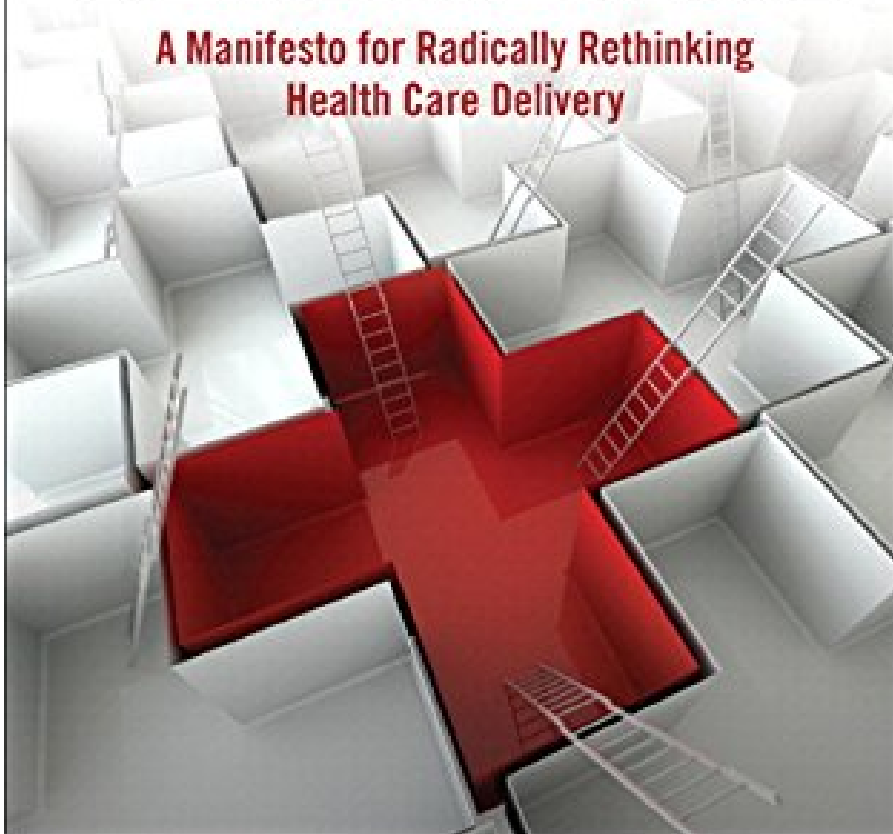
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REENGINEERING HEALTH CARE

**A Manifesto for Radically Rethinking
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Most helpful customer reviews

8 of 8 people found the following review helpful.

Interesting Ideas but Flawed

By David Ross

While "Reengineering Health Care" presents a range of useful information, the authors claim that they have produced a manifesto for rethinking health care delivery is wildly overblown. While their stories advocate persuasively for the benefits of preventative primary care, patient education and better coordination of care they fail to even mention the financial incentives and disincentives in the current health care system that work against these beneficial approaches. For example many diabetes education programs which surely help patients stay healthier have failed due to inadequate insurance reimbursement. Curiously the authors don't even mention by name the well accepted concept of a "medical home." though conceptually that is the thrust of much of what they recommend. Overall their approach is dominated by inspirational success stories by a number of remarkable innovators without considering the practice and reimbursement environment that allowed these innovations to succeed.

The discussion of electronic health records was particularly useless in my opinion as a nurse who is looking forward to the federally funded implementation of such systems at my workplace and many other hospitals within the next 8 to 10 months. For example the authors fail to seriously consider the need for and barriers to information exchange between primary care, specialist and hospital health records. I did find some novel and useful ideas in this book. For example, their well supported description of the efficiency and patient satisfaction with group medical appointments was a surprise to me. They also justly tout the cost effectiveness of web based patient education though without any suggestion of who is going to fund or pay

for it. Another takeaway point for me which their success stories exemplify is that reengineering needs be thought of primarily in terms of culture change rather than technology implementation. In a similar vein they emphasize the importance of interpersonal communication even to the extent of overcommunicating to provide the most effective and safest health care.

5 of 5 people found the following review helpful.

More motivation than "how-to" manual

By Angie Boyter

Anyone who reads Reengineering Health Care is going to emerge a "Believer". In this short book, only 216 pages with very generous margins and spacing, Champy & Greenspun effectively present their argument that health care operations not only NEED to be improved, they CAN be improved. The book is filled with numerous examples of organizations that have successfully improved their quality AND reduced their costs, winning over both doctors and CFOs.

Fundamentally, there is nothing new here. Reengineering, process improvements, a culture of teamwork---all of these techniques have been adopted and used effectively throughout many kinds of organizations for well over twenty years. What is relatively new is their application to health care. Recent initiatives to improve the US health care system have motivated many people to do much more than address funding issues; there is growing interest in changing the way the system works in order to improve quality, reduce costs, and expand access. Reengineering Health Care joins other recent books like Atul Gawande, *The Checklist Manifesto* and Peter Pronovost, MD, & Eric Vohr, *Safe Patients, Smart Hospitals* (both recommended) in calling for application of modern business techniques to medical practices, hospitals, and other health care systems.

As a motivational work, this book is outstanding, but I would say it falls somewhat short of the goal of offering " a clear roadmap for realizing that potential in your own organization" promised on the front flap. There is a multiplicity of practical ideas presented that could be used or adapted or serve as inspiration in a wide variety of settings, and most chapters contain what is called a checklist of questions to ask yourself as you approach your own reengineering effort. There is a lot of good stuff here! Admittedly "health care" encompasses a huge variety of sizes, types of services, and opportunities for improvement that cannot be addressed adequately with a "one size fits all" prescription, but I would have liked a somewhat more comprehensive and organized presentation of how to embark on and conduct reengineering in a given organization.

7 of 8 people found the following review helpful.

An excellent call to action on HC reengineering

By Eric W. Palfreyman

Amazon.com Review of "Reengineering Healthcare: A Manifesto for Radically Rethinking Health Care Delivery. Jim Champy, J.D., and Harry Greenspun, M.D. FT Press, Upper Saddle River, NY. 2010.

Eric W. Palfreyman

July, 2010.

In the present cultural climate--with its emphasis on political absolutism--it would be easy to hand off responsibility for healthcare change to the government. To its credit, Reengineering Healthcare does not do this. In the beginning, it specifically places the action on those who can most directly and positively influence it:

"Reengineering must be done, and it must be done by clinicians. No angel of government, even under the auspices of 'national health care reform,' can reduce the cost and improve the quality of health care without the work and leadership of clinicians. It's time for all clinicians--physicians, nurses, technicians, physician assistants, and pharmacists--to assume their rightful role in directing change."

The first question I want answered in any book I'm considering is whether it is a good read. The answer on Reengineering Healthcare is a resounding "yes". Champy's writing has always been high on a readability scale and Champy and Greenspun have delivered a book that is easy to read and engaging from beginning to end. It is an excellent mixture of case studies, narrative, inspiration, challenge, and technique. The book is long enough to convey knowledge and inspiration, but not long enough to become tedious. If its desire was to inspire as well as instruct, it is a very successful book.

Their book begins by reviewing what reengineering is, and touches on ideas such as the idea that reengineering is not simply a look at discrete issues for resolution, but is an examination of the entire system of getting things accomplished. The authors place a focus on examining systemic issues and solving them in a comprehensive way. They recognize that reengineering is focused on fundamental change (not simply incrementalist tweaks), radical approaches that do not simply touch the surface, and focusing on areas that can create dramatic results. In brief, they state, "the methodologies and techniques may vary in name, but they all share the same ambition for dramatic improvement in the performance of work by focusing on process."

They then turn to reengineering specific to healthcare. They lay the book around three areas of reengineering: Technology, Processes, and people. A thesis of the book is that any reengineering that is to be substantive must incorporate all three elements in order to fully create the kind of massive change that is needed.

Another strength of the book is that while it strongly highlights cost improvements, reduction in time-to-results, and reduced duplication; it always maintains a focus on delivering quality healthcare and on maintaining a focus on patient safety.

The book covers topics from selecting which processes/organizations need to be improved (and what criteria go into that decision) to a focus on continual interaction with the "front line"--the people who actually deliver healthcare. This effort may be authorized and funded by top executives, but the root cause analysis and proposals for process improvement are derived from and approved by those who actually deliver healthcare to patients--physicians, nurses, pharmacists, medical technicians, etc.

A review seems incomplete without one criticism, so if I had to come up with one deficit in the book, I would have like to have seen a couple of the case studies accompanied by simplified process flow charts showing a before and after architectural view of the process.

For those interested in improving all aspects of healthcare delivery and in harnessing the power of innovative reengineering to accomplish this, Reengineering Healthcare is a must read.

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