Editorial

This issue of *Management in Healthcare* begins with a case study by Curtis Turner, Professor of General Pediatrics and Pediatric Hematology and Oncology at University of South Alabama. Curtis demonstrates how the university clinic has tackled the problem of missed appointments through the implementation of and 'on demand' or open access scheduling system. He shows how this new system of templates and schedules has accelerated the rate at which patients are seen, and enforced individual responsibility among resident physician providers and Advanced Pediatric Practitioners, resulting in fewer missed appointments and reduced phone call volumes for families attempting to schedule future appointments, as well as improving the revenue cycle, patient care and the education of medical students and pediatric physicians in training.

In a further case study, the team of authors led by Mark Fleischer, Principal Health Systems Engineer at the Mayo Clinic reveal how they analysed problems with the clinic's centralised healthcare access model including low patient and provider satisfaction with scheduling, decreasing patient access, and less-than-optimal patient throughput, all of which contributed to declining financial performance. They go on to describe how they developed a new scheduling model, a hybrid of centralised and decentralised models, which promised the benefits of both and involved transformation in clinical practice operations and access management, with improved access metrics for average speed to answer, abandoned call rates, patient access and throughput, financial performance, and patient and provider satisfaction. This well-written paper with attention to 'the voice of the customer' has the potential for replication in other areas and would be

valuable to any healthcare organization that is experiencing low customer satisfaction with centralised scheduling.

Stefan Cantore, Senior University Teacher in Organisation Development and Management Learning at the University of Sheffield introduces a new layer to leadership in complex, adaptive systems like health care organisations. He makes a convincing argument that focusing solely on organisational management is no longer sufficient to be effective. Instead, healthcare managers and leaders must also give attention to behavioural practices (and that quite different behaviours are often needed to those often modelled by organisational managers and taught on management development programmes). Drawing on research of practice within a large UK rehabilitation unit, Stefan explores the challenges faced by healthcare managers and professionals as they grapple with complex organisational dynamics and concludes that a refocussing of leadership development is required to stimulate individual interest in system behaviour.

Michael Newell, Partner and Jonathan Mason, Director at Moss Adams focus on the the change to the Inpatient Prospective Payment System Medicare (IPPS) Disproportionate Share (DSH) programme, notably Worksheet S-10 and the history of S-10 audits that are a result of the new methodology. Michael and Jonathan provide insights to help hospitals and hospital system providers understand what they can expect in S-10 audits and tips to help them prepare their organization.

Drew Rosen, Progress Energy/ Gordon Hulbert Professor of Operations Management and Rebecca Scott, Assistant Professor of Supply Chain and Business Analytics in the University of North Carolina Wilmington's Cameron School of Business review the impact of healthcare quality on patients and what needs to be done to advocate for further quality improvements. They identify a gap in the literature relating to service quality in urgent care facilities and examine the link between service quality as perceived by patients and its service determinants. Their aim is that the knowledge generated by this research will enable healthcare professionals to provide guidelines for operating strategies that urgent care facilities need to successfully compete in the 'new world' of affordable healthcare.

The research by Michon Revader, an Instructor at the Cardiopulmonary Science Program at LSU Health Shreveport's School of Allied Health Professions, examines the relationship between how clinical workers perceive leadership expertise of their supervisor and the turnover intentions and job satisfaction of employees. Based on research from health care organisations in Southern Louisiana, Michon's research will be valuable to healthcare leaders seeking to examine the relationship of healthcare supervisor competencies and workforce shortages.

Finally, Mark Bonica, Assistant Professor and Cindy Hartman, Assistant Professor in the Department of Recreation Management and Policy at the University of New Hampshire, examine the experiences of 12 graduates from a traditional undergraduate programme in health administration over two years during the school-to-work transition (STWT). They highlight the importance of factors supporting successful STWT including organisational socialisation, organisational support, proactive socialisation, work competence, coaching, and mentoring. Mark and Cindy go on to provide an integrated model of successful STWT from both individual and organisational perspectives, as well as recommendations for healthcare organisations aiming to improve STWT outcomes.

We hope you enjoy reading this issue and, as always, if you would be interested in submitting a paper or case study to a future issue please don't hesitate to contact me at the address below. We look forward to hearing from you.

> Simon Beckett Publisher February 2021 Email: simon@hspublications.co.uk