

QUALITY IN HEALTH CARE

Editor: Fiona Moss

Associate editors: Richard Baker, Alison Kitson, Michael Maresh, Steve Nixon, Richard Thomson, Chris West

Technical editor: Diana Blair-Fish

Editorial assistant: Ruth Clarke

EDITORIAL BOARD

N Barber	A Frater	A Hopkins	M McNicol	C Shaw
H Buchan	J Gabbay	D Kerr	K McPherson	B Stocking
D Costain	A Giraud	V Maehle	J Muir Gray	J Wadsworth,
N Dickson	J Girvin	N Mckechnie	C Normand	statistical adviser
J Firth-Cozens	B Haussler	H McKenna	M Rigge	Editor, <i>BMJ</i>

Notice to subscribers

Quality in Health Care is published quarterly. The annual subscription rates are £82 worldwide for institutions and £50 for individuals. Rates for individuals are available only on orders placed directly with the publisher and paid for out of personal funds. Orders should be sent to the Subscription Manager, *Quality in Health Care*, BMA House, Tavistock Square, London WC1H 9JR. Orders can also be placed with any leading subscription agent or leading bookseller. Subscribers may pay for their subscriptions by cheque (payable to British Medical Journal) or by Access, Visa, or American Express by quoting on their order the credit or charge card preferred together with the appropriate personal account number and the expiry date of the card. (For the convenience of readers in the US subscription orders with or without payment (\$144 for institutions; \$86 for individuals) may also be sent to British Medical Journal, Box 560B, Kennebunkport, Maine 04046. All inquiries, however, must be addressed to the publisher in London.)

Notice to advertisers

Applications for advertisement space and for rates should be addressed to the Advertisement Manager, *Quality in Health Care*, BMA House, Tavistock Square, London WC1H 9JR (071 383 6339).

COPYRIGHT © 1992 *Quality in Health Care*. All rights reserved. No part of this publication may be reproduced, stored in a retrieval system, or transmitted in any form or by any means, electronic, mechanical, photocopying, recording or otherwise, without prior permission of *Quality in Health Care*.

US second class postage paid, at Rahway NJ. Postmaster to send address changes to: *Quality in Health Care*, c/o Mercury Airfreight International Ltd Inc, 2323 Randolph Avenue, Avenel, NJ 07001, USA.

ISSN 0963 8172

described by David Fry of the King's Fund, currently nine of the 40 hospitals in the programme are going through a second survey. The survey standards have been revised and the accreditation element of this approach may be given a higher profile. It is planned to extend the approach into community services and general practice and health centres.

Changing the culture within organisations was covered by Nancy Saldona, in outlining how Cigna Employee Benefits adopted a total quality management

approach by integrating into its corporate culture the phrase "do it, test it, fix it."

Steve Nixon, however, illustrated how success can bring its own problems. One of the dilemmas in his surgical unit is that of lengthening waiting lists as a result of advances in laparoscopic surgery. In his view, patients should have the choice of doctor, hospital, and appointment. He felt that more data bring better interaction between professionals and patients and should enable a balance to be achieved between the needs of patients, surgeons,

managers and training, research, and teaching.

The lessons of the commercial and industrial sectors are being repeated in health care. Gaining the most from quality improvement requires a strategy encompassing many organisations. There is still a long way to go, but the various elements of the health care sector can learn from each other, from international perspectives on health, and from the non-health care sectors.

NORMA DOHERTY
Vice Chair, Association for Quality in Healthcare

DIARY

19-21 October

Leeds: Nuffield Institute for Health Services Studies. Coming to grips with quality assurance. A workshop to help managers to develop strategies for implementing quality assurance. (£425, excluding accommodation.) Further details from Sally Sugden, Nuffield Institute for Health Services Studies, 71-75 Clarendon Road, Leeds LS2 9PL (tel 0532 459034; fax 0532 460899).

1 November

Deadline for abstracts. The Hague, Netherlands: WONCA (World

Organisation of National Colleges, Academies, and Academic Associations of General Practitioners/Family Physicians)/SIMG (International Society of General Practitioners) congress 13-17 June 1993. Quality of care in family medicine/general practice. Guidelines for abstracts, abstract forms, provisional programme from WONCA/SIMG Congress 1993, NHG, PO Box 3231, 3502 GE Utrecht, The Netherlands.

3 November

Leeds: Nuffield Institute for Health Services Studies. Techniques for identifying training and development needs. A workshop that introduces two different techniques for analysing individual development needs and strengths. (£105.) Further details from Sally Sugden (see above).

17 December

London: St Bartholomew's Hospital Medical College, London. National conference on public priorities for health care. (£78). Topics include: methods of consulting the public; results from surveys and focus group approaches in three DHAs in England, how to incorporate the results into planning and contracting for hospital, community and primary care services. Details from Dr Ann Bowling, Health Needs Assessment Unit, St Bartholomew's Hospital Medical College, Charterhouse Square, London, EC1M 6BQ (or telephone Lisa Burnett: 071 601 7747).

QUALITY QUOTES

"One of the greatest pains to human nature is the pain of a new idea." - WALTER BAGEHOT (1826-1877)

"And how his audit stands who knows save heaven?" - SHAKESPEARE, *Hamlet*, verse 80

"We must show subscribers how their money was being spent and what amount of good was being done with it." - FLORENCE NIGHTINGALE, 1859

"Quality costs money; money does not necessarily buy quality; some improvements in quality are not worth the added cost." - DONABEDIAN, 1986

"Quality is like sex appeal; most people know what it is; some people think they manage it rather well; but they all have different notions about what it consists of and those notions vary from age to age and place to place." - DEPARTMENT OF TRADE AND INDUSTRY, Introduction, *The Quality Approach*, 1992



Amusing or erudite items relating to quality - including examples of "qualityspeak", cartoons, etc - are welcomed for publication and should be addressed to the editor

Instructions for authors

Papers should be sent in triplicate to the editor, *Quality in Health Care*, North West Thames Regional Health Authority, 40 Eastbourne Terrace, Paddington, London W2 3QR (tel 071 262 8011). They should be prepared according to the Uniform Requirements for Manuscripts Submitted to Biomedical Journals (Vancouver agreement) (*BMJ* 1991;302:338-41).

General

- All material submitted for publication is assumed to be submitted exclusively to the journal unless the contrary is stated.
- All authors must give signed consent to publication. (Guidelines on authorship are given in *BMJ* 1991;302:338-41.)
- The editor retains the customary right to style and if necessary to shorten material accepted for publication.
- Type all manuscripts (including letters) in double spacing with 5 cm margins at the top and left hand margin.
- Number the pages.
- Give the name and address and telephone and fax numbers of the author to whom correspondence and proofs should be sent.
- Do not use abbreviations.
- Express all scientific measurements (except blood pressure (mm Hg)) in SI units.
- Permission to reproduce previously published material must be obtained in writing from the copyright holder (usually the publisher) and the author and acknowledged in the manuscript.
- Keep a copy of the manuscript for reference.
- An acknowledgement of receipt of the manuscript will be sent, with a manuscript reference number and the approximate time to receipt of a proof.

Specific points

ARTICLES

Articles report research and studies relevant to quality of health care. They may cover any aspect, from clinical or therapeutic intervention, to promotion, to prevention. They should usually present evidence indicating that problems of quality of practice may exist, or suggest indications for changes in practice, or contribute towards defining standards or developing measures of outcome. Alternatively, they should contribute to developing approaches to measuring quality of care in routine practice. The journal is interprofessional and welcomes articles from anyone whose work is relevant, including health professionals, managers, practitioners, researchers, policy makers, or information technologists. Papers are usually up to 2000 words long with up to six tables or illustrations. Shorter practice reports, which may not be original in concept but must contain information sufficiently novel to be of importance to other units, are also invited. Articles of a discursive or debating nature, which do not conform to the criteria for original papers given above, will be considered.

- Give the authors' names, initials, and appointment at the time of the study.
- Articles should generally conform to the conventional format of structured abstract (maximum 250 words; see *BMJ* 1988;297:156), introduction, patients/materials and methods, results, discussion, and references.
- Whenever possible give numbers of patients/subjects studied (not percentages alone).
- Any article may be submitted to outside peer review and assessment by the editorial board as well as statistical assessment; this may take up to eight weeks.
- Manuscripts rejected for publication will not be returned.

LETTERS

- Should normally be a maximum of 400 words and 10 references.
- Must be signed by all authors.
- Preference is given to those taking up points in articles published in the journal.
- Authors do not receive proofs.

Tables

- Should be on separate sheets from the text.
- Should not duplicate information given in the text of the article.
- Should have a title.
- Should give numbers of patients/subjects studied (not percentages alone) whenever possible and relevant.

Figures

- Should be used only when data cannot be expressed clearly in any other form.
- Should not duplicate information given in the text of the article.
- Should be accompanied by the numerical data in the case of graphs, scattergrams, and histograms (which may be converted into tables).
- Should include numbers of patients/subjects (not percentages alone) whenever possible and relevant.
- Legends should be given on a separate sheet.

LINE DRAWINGS

- Should be in Indian ink on heavy white paper or card or presented as photographic prints. One original and two photocopies of each must be submitted.

HALF TONES

- Should usually be submitted as prints, not negatives, transparencies, or x ray films.
- Should be no larger than 30x21 cm (A4).
- Should be trimmed to remove all redundant areas.
- The top should be marked on the reverse in pencil.
- Labelling should be on copies, not the prints.
- The identity of patients in photographs should be concealed or their written consent to publication obtained.

References

- Should be numbered sequentially in the text.
- Should be typed in double spacing.
- Should give the names and initials of all the authors (unless there are more than six, when the first six should be given followed by *et al*); the title of the article or chapter, *and* the title of the journal (abbreviated according to the style of *Index Medicus*), year of publication, volume number, and first and last page numbers *or* the names of any editors of the book, title of the book, place of publication, publisher, and year of publication, and first and last pages of the article.
- Information from manuscripts not yet in press, papers reported at meetings, or personal communications should be cited in the text, not as formal references.
- Authors are responsible for the accuracy of references.

Proofs and reprints

- Corrections to proofs should be kept to a minimum and should conform to the style shown in *Whitacker's Almanack*.
- Corrections other than printers' errors may be charged for.
- Justification for corrections, if necessary, should be given in a letter and not on the proof.
- Reprints are available; an order form and scale of charges are included when the proof is sent out.