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### **Healthcare Systems (Executive Format) HCIN/ISEM 541**

**Section 51-A  
SUMMER 2021**

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**Online office hours:** By appointments only

## Course Description

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Healthcare issues have dominated American politics for over 100 years because the cost is high, the access is not equitable, the delivery varies significantly across the country, and the efficiency is questionable at best. The United States healthcare system is unique compared to other industrial democracies, since healthcare policies and politics in this country are affected by state and federal governments, private and public interest groups and commercial entities with high profit-making motives. Although the United States sets the international standard in medical sciences, education and technology, it consistently ranks behind most developed nations in measures of national health, cost, access and delivery. Most western European democracies offer a socialized healthcare system with various degrees of success, while the United States socialized only a small portion of its healthcare under Medicare and Medicaid. In the United States, the emphasis has traditionally been on "Market Justice" while in Europe that has been on "Social Justice" in health care. However, the debate over the extent of healthcare socialization, privatization and government regulation continues. The Affordable Care Act (ACA) passed under the Obama administration raised new issues in the areas of healthcare affordability, accessibility and government regulation, and repeal and/or replacement continues to be a priority for the current Administration.

This course addresses key issues in healthcare from cost to access, delivery, efficiency and politics. The course will specifically address issues and concerns after the establishment of ACA. Topics covered in this course are the definition of healthcare systems, health care utilization and needs, health status, delivery and public health, healthcare structure in this country and others with relatively successful models, type of provider organizations such as hospitals, ambulatory healthcare practices, long-term healthcare facilities and mental healthcare services. The course also addresses questions in the domains of equity and efficiency, market and politics of healthcare, interest groups in the politics of healthcare, and the ethics of healthcare policy in this nation. Students will also be exposed to global health issues that impact healthcare beyond the border of a specific country. The goal is to offer a holistic approach in understanding healthcare delivery in the United States and abroad.

## Learning Objectives

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Students successfully completing this course will be able to discuss:

- The structure of healthcare delivery systems in this country and selected other countries
- The relative costs of healthcare in the United States and other developed industrial nations
- Concepts of health status and resource utilization
- Healthcare delivery including ambulatory care, hospitals and other health provider organizations
- Health insurance organizations
- How ACA affected health insurance structure in this country
- The framework of healthcare politics and policy
- Fairness, access, efficiency and delivery in health care
- The role of interest groups
- The political institutions impacting the course of healthcare policies and politics in this country, including the Congress, the President, the Courts, and State Governments
- Socialization, regulation and privatization of health care
- Strengths and weaknesses of American and other selected healthcare systems
- Global healthcare issues
- Institutions of global health and global health promotion
- What lessons other healthcare systems can teach the United States
- How other countries provide quality care, accessibility and lower cost

## Texts and Reading Materials

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### Required:

Leiyu Shi and Douglas A. Singh, *Delivering Health Care in America: A Systems Approach (7<sup>th</sup> Edition)*, Jones & Bartlett Learning, 2019

### Suggested:

Margie Lovett-Scott and Faith Prather, *Global Health Systems: Comparing Strategies for Delivering Health Services (2<sup>nd</sup> Edition)*, Jones & Bartlett Learning, 2018

James Johnson, Carleen Stoskopf and Leiyu Shi, *Comparative Health Systems: A global perspective (2<sup>nd</sup> edition)*, Jones & Bartlett Learning, 2018

*These texts may be rented or purchased from many online sources or read in the HU library on campus.*

## Student Assignments

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### Time Commitment

Students are expected to spend a minimum of 126 hours of student engagement (for a three-credit course) led by a faculty member. These hours are delivered through a variety of instructor-led activities; and may include: Adobe Connect sessions, audio and/or video lecture with Q & A, online discussion boards, one-on-one dialogue, problem solving scenarios, projects, research papers, and so on to ensure all course outcomes are met. This course syllabus and the Canvas site contain details.

### Individual Assignments

There are 10 individual assignments covering the reading materials of the course. Each week students read assigned reading materials, participate in synchronous online sessions (Adobe Sessions), and then answer several critical questions. The written portion will take at least 3 hours to research and complete. Students must post these assignments on **Canvas** before the next online session.

### Team Assignments

There are 2 team projects, each requiring at least 15 hours of work by each student, assessing the students' grasp of the course materials and their ability to function as effective team members. Teams will be assigned by the Instructor about 2 weeks before Project 1 is due, and the teams will remain the same for Project 2.

### Project 1-Global Health Issue

This is a team project. Teams of 2-3 students will choose a global health issue from the past or present and investigate how the international community and institutions, including Inter-Governmental Organizations (IGO's) and Non-Governmental Organizations (NGO's), have responded to it. In this project, students must concentrate on how the health issue was addressed, how widespread the problem was and how impacted individuals and communities received healthcare services. For this project, materials from World Health Organization, National Institute of Health and/or other IGO and NGO organizations must be accessed and used. The team will put its findings on PowerPoint slides and present them during an executive class session. The teams will be prepared to answer questions about their material from students and instructors.

Teams will submit their Project 1 slides to Canvas on time. The deadline for submitting this project will be posted on Canvas.

### Project 2-Comparing Health Care Systems

The same teams of students will compare health care systems of several countries. Students are responsible to compare and document healthcare systems in at least 3 different countries (not in North America) in terms of accessibility, delivery, financing, cost, quality and structure. This project combines theory, cases and critical thinking and analysis. Students will do research and investigation to complete this project as a team and will integrate their results. They will put their findings on PowerPoint slides and

present them during an executive class session. The teams will be prepared to answer questions about their material from students and instructors.

Teams will submit their Project 2 slides to Canvas on time. The deadline for submitting this project will be posted on Canvas.

### **Final Individual Project-Disparities in Healthcare**

This is an individual activity and tests the students' ability to consume, synthesize, and apply all they learned during the course in order to address specific disparities existing among several countries' health care systems. These reports are in professional report format, not PowerPoint.

Each student picks a geographic region with at least three countries (*not North America*) and investigates health care in the context of poverty, public and professional education, distribution of providers by specialties and educational levels, allocation of resources (including locations of medical facilities and providers), overall management of the health care by government as well as other political, social and economic factors. It will be important to investigate and document links between poverty, education and accessibility to the *quality* of health care and delivery.

Each student will write a report combining statistics and information from various reputable international sources with their own insights into an analysis of current strengths and weaknesses for each country. They will integrate the reports to create potentially workable solutions to the shortcomings and problems they have discovered. The students must utilize primary sources, consulting the literature and works of known and well reputed organizations such World Health Organization (WHO) and/or National Institutes of Health in their research. The students must also follow scholarly methods of conducting research, organizing data, and citing references. The deadline for submitting reports is posted in Canvas. The reports are not limited to a specific number of pages, but this Final Project should take at least 15 hours to complete.

## **Class Rules and Grading Policies**

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### **Session Expectations**

- Students are required to use **Canvas** (the course management system for HU) located at <http://canvas.harrisburgu.edu>. This may be required both during and outside of sessions. Course materials, reading assignments, due dates and outlines are posted on Canvas. Each student is responsible for reading any course announcements posted on Canvas. In addition, students have to complete assignments and upload documents to Canvas.

### **Session Participation**

- Class participation means presence and active participation in the 3 executive sessions as well as for the online evening sessions. Questions and comments are welcome using the chat box functionality during online sessions. The Instructor will

either answer questions at the end of the lecture or reply by email after the session if there is not enough class time available.

- Attendance is recorded for each class. If a student must miss a session for any reason, the Instructor must be sent an e-mail or a voice mail message **before** the class begins. This is a professional courtesy.
- It is **the student's** responsibility to find out what material was missed if you are absent. You must obtain information or notes from another student or watch the recording of the session on Adobe Connect. Faculty does not provide students with individualized instruction or lecture notes.
- Faculty recognizes that any student may be absent on occasion due to illness, family issues, job-related circumstances, and so forth. Each student is allowed one **legitimate** absence without penalty. Additional absences may cause the Instructor to refer the student for counseling.

## Late Assignments

All course assignments, including projects, must be completed and submitted on time. Late submission without PRIOR approval will receive a late deduction. Any late assignment will receive a 30% deduction for every week that the assignment is late. After two weeks, the late assignment will receive a zero grade. No late assignments will be accepted after the last day of class (online session).

A late assignment will be excused with a penalty of 25% if the student has a health, a family death, or a personal hardship, if the assignment is submitted within 21 days from the due date and before the last day of class.

Students are highly encouraged to manage their time appropriately. Graduate students specifically are expected to manage their courses well and meet the deadlines. Note: If Canvas is down at the time of the assignment submission, you will have a grace period of 48 hours to submit your assignment to Canvas without contacting your instructor.

## Grading Scale

The final grade is based on the following activities and weights in Table 1. The total points earned is assigned a letter grade according to the grading scale in Table 2. Overall grading criteria are described in Table 3. Remember: a grade of C is not acceptable for graduate studies.

**Table 1. Grade Activities and Weights**

<b>Activities</b>	<b>Weights %</b>
Project 1: Global Health Issue	25
Project 2: Comparing Health Care Systems	25
Class Participation/Discussion and Written Assignments	20
Final Project: Disparities in Healthcare	30
<b>Total</b>	<b>100</b>

**Table 2. Grading Scale**

<b>Grade Letter and Range</b>								
<b>A</b>		<b>B</b>			<b>C</b>			<b>F</b>
90% - 100%		80% - 89%			70% - 79%			69% or Below

**Table 3. Grading Criteria**

<b>Grade</b>	<b>Criteria</b>
<b>A</b>	Signifies outstanding work. Student demonstrates <u>superior</u> analytical skills and provides <u>creative and innovative</u> solutions to assignments.
<b>B</b>	Signifies performing at the average level for graduate work, performing the work as assigned. ( <b>Completes work defined in this syllabus.</b> )
<b>C</b>	Signifies performing the work at a level less than expected for a graduate student
<b>F</b>	Significantly below the expected work for the course in terms of completion or quality

## Honor Code

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There is NO tolerance for plagiarism in this class. Plagiarism is punished at HU to the maximum extent possible. **Plagiarism is copying an existing work without referencing the source.** That is stealing the idea(s) or words of another and passing them off as your own. All students are held accountable. Incidences of plagiarism, cheating, or any form of academic dishonesty may result in a grade of “F” for the related assignment and/or for the entire course, as well as referral by the Instructor for potential academic discipline or dismissal.

All students are required to abide the HU Honor Code that includes academic integrity and personal responsibility for learning. Students are responsible for understanding the requirements for each course, and for complying with the rules. Students are responsible for reading and understanding the HU Student Code of Conduct/Honor Code in the Student Handbook at <http://www.harrisburgu.edu/current-students/>. Students are expected to adhere to it at all times.

HU has automated systems to detect plagiarism. HU is committed to its honor code. The cost of plagiarism is very high for those students who do not honor HU’s honor code. There is no justification for plagiarism.

## Student Support and Resources

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As a student, you should always ask for any help that you need to be successful! HU offers many support services for our students. Additional information can be found on the student services webpage: [https://myhu.harrisburgu.edu/ICS/Campus\\_Life/](https://myhu.harrisburgu.edu/ICS/Campus_Life/)

### IT Support

- For help with computer, software, or printer problems - submit a request to [HelpDesk@HarrisburgU.edu](mailto:HelpDesk@HarrisburgU.edu)

### Academic Support

- Help with advising, study skills, time management - email [Advising@HarrisburgU.edu](mailto:Advising@HarrisburgU.edu)
- Research, resources, and library questions - email [Library@HarrisburgU.edu](mailto:Library@HarrisburgU.edu)
- Reading & writing assistance - email [tutoring@HarrisburgU.edu](mailto:tutoring@HarrisburgU.edu)
- Tutoring - email [Tutoring@HarrisburgU.edu](mailto:Tutoring@HarrisburgU.edu) or [gradstudentservices@harrisburgu.edu](mailto:gradstudentservices@harrisburgu.edu)
- Access online tutoring 24 hours a day, 7 days a week through Smarthinking (via link on Canvas)

### ADA Accommodations

- For documented disability accommodations at HU, email [ada@harrisburgu.edu](mailto:ada@harrisburgu.edu)

### **International Student Services**

- For questions regarding the CPT requirements or anything about your Visa, submit an inquiry via the Student Support Network

**Syllabus Change Policy:** This syllabus is a guide for the course and is subject to change with advanced notice. If you have a questions about the syllabus or any element of this course, ask me right away. You will be asked to confirm your agreement with the syllabus later in the course. Without agreement, your assignments and exams will not be graded. Note that if you cannot agree with the syllabus, you have an option of dropping from the course.

### **Writing Resources**

- Submit your writing for feedback on **Smarthinking** (online tutoring service) - Access via link on Canvas
- Writing Lab, Towson University [http://www.towson.edu/owls/index,htm](http://www.towson.edu/owls/index.htm)
- English Writing, Really Learn English <http://www.really-learn-english.com/parts-of-a-sentence.html>
- Guide to Grammar and Writing, Capital Community College Foundation <http://grammar.ccc.commnet.edu/grammar/index.htm>
- Purdue Online Writing Lab <https://owl.english.purdue.edu/owl/resource/561/2/>
- APA Style, Purdue Online Writing Lab <https://owl.english.purdue.edu/owl/section/2/10/>
- HU Library APA Guide: <http://library.harrisburqu.edu/apa>

### **Career Resources**

- Submit your resume for review and prepare for an interview by utilizing **Smarthinking**
  - Check out Career Resources on the “Student Services” Tab of MyHU
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## **HU Core Competencies**

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### **Critical Thinking**

The use of deliberative thought, characterized by the comprehensive exploration of topics, ideas, artifacts, or events before accepting or formulating an opinion or conclusion.

### **Critical thinkers will demonstrate the competency to:**

- ♦ Work with context, evidence, opinions, and error
- ♦ Analyze connections and draw conclusions
- ♦ Problem Solving
- ♦ Quantitative literacy: Interpretation
- ♦ Quantitative literacy: Representation
- ♦ Quantitative literacy: Calculation
- ♦ Quantitative literacy: Assumptions
- ♦ Quantitative literacy: Communication

### **Communication**

The development and expression of ideas in involving a variety of styles, genres, and technologies through repeated written and oral communication experiences.

### **Those demonstrating communication skills will exhibit the competency to:**

- ♦ Write within context and for purpose
- ♦ Develop Content
- ♦ Adhere to genre and disciplinary conventions
- ♦ Use sources and evidence
- ♦ Control use of grammar and mechanics
- ♦ Organize Presentation
- ♦ Select appropriate language
- ♦ Deliver Presentation
- ♦ Provide supporting material
- ♦ Convey a central message

### **Teamwork and Collaboration**

The ability to work effectively with others in a concerted effort toward a common goal.

### **Those showing effective collaboration skills will demonstrate the competency to:**

- ♦ Recognize how to maximize group efficiency
- ♦ Contribute to group tasks as an individual
- ♦ Facilitate the contributions of team members
- ♦ Contribute to team function
- ♦ Be a valued contributing member

### **Entrepreneurship**

The process of organizing tangible and intangible resources to pursue opportunities that generate value, meet an identified need, or satisfy an organizational or societal market.

### **The successful entrepreneur will demonstrate the competency to:**

- ♦ Understand relationships between costs and benefits
  - ♦ Evaluate stakeholders, needs, and markets
  - ♦ Practice innovative thinking
  - ♦ Understand leadership and organization roles
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<p><b>Information Literacy</b> The knowledge and familiarity with different media types, efficient data storage, retrieval methods, and research techniques.</p>	<p><b>An information literate person will demonstrate the competency to:</b></p> <ul style="list-style-type: none"> <li>◆ Determine the extent of information needed</li> <li>◆ Collect and retrieve the needed information</li> <li>◆ Evaluate information and its sources</li> <li>◆ Use information sources to accomplish a specific purpose</li> <li>◆ Use communication and information technologies</li> <li>◆ Access the use of information ethically and legally</li> </ul>
<p><b>Ethical Decision Making</b> The realization and inclusion of the moral dimension for personal decision-making.</p>	<p><b>An ethical citizen will demonstrate the competency to:</b></p> <ul style="list-style-type: none"> <li>◆ Recognize ethical issues and consequences</li> <li>◆ Understand ethical philosophies</li> <li>◆ Exhibit ethical self-awareness</li> <li>◆ Process and apply ethical considerations</li> </ul>
<p><b>Global Awareness</b> The knowledge of the world citizenry's interests, appreciation and respect, and the interaction and impacts of individuals, global systems, and cultures.</p>	<p><b>A globally aware citizen will show an understanding of:</b></p> <ul style="list-style-type: none"> <li>◆ Global context</li> <li>◆ Action in global context</li> <li>◆ Global solutions</li> <li>◆ Worldview frameworks</li> <li>◆ Global interactions</li> </ul>
<p><b>Civic Engagement</b> Working to make a difference through the participation in personal and public activities that are life-enriching and socially beneficial.</p>	<p><b>An engaged citizen will demonstrate the competency to:</b></p> <ul style="list-style-type: none"> <li>◆ Connect knowledge to civic engagements</li> <li>◆ Express civic identity and commitment</li> <li>◆ Adapt civic communication strategies</li> <li>◆ Initiate civic action and collaboration</li> </ul>

## Lecture and Reading Schedule

The following calendar will be maintained during the course of the semester, and the reading assignments will be posted on Canvas. Students must read each assignment *before* the meeting time for which it is assigned.

Class	Topic Textbook: <i>Delivering Health Care in America, 7<sup>th</sup> Edition</i>	Assig. Due on Canvas by 11:59pm EST
Exec #1 May 8	Introduction to the course: US Healthcare Delivery Read: Chapter 1 and Chapter 2	May 18 Assig. #1
Online 1 May 11	<b>Self-study: No class post Executive Session #1</b> Read Chapter 3 Case Study Discussion	May 18 Assig. #2
Online 2 May 18	<i>Healthcare Professionals</i> Read: Chapter 4	May 25 Assig. #3
Online 3 May 25	<i>Healthcare Technology</i> Read Chapter 5	June 1 Assig. #4
Online 4 June 1	<i>Healthcare Finance</i> Read Chapter 6	June 8 Assig. #5
Online 5 June 8	<i>Outpatient and Primary Care Services</i> Read Chapter 7	<b>Work on Team Proj. #1</b>
Exec #2 June 12	Project 1 Team Presentations and discussion	
Online 6 June 15	<b>Self-Study: No class post Executive Session #2</b> <i>Inpatient Care</i> Read Chapter 8	<b>Reading Only</b>
Online 7 June 22	Managed Care Read Chapter 9	June 29 Assig. #6
Online 8 June 29	Long Term Care Read Chapter 10	July 6 Assig. #7
Online 9 July 6	Health Services for Special Populations Read Chapter 11	July 13 Assig. #8
Online 10 July 13	Access, Cost, and Quality (1/2) Read Chapter 12	July 20 Assig. #9
Online 11 July 20	Access, Cost, and Quality (2/2) Read Chapter 12	July 27 Assig. #10

	Read: Delivering Healthcare in America, Chapter 10	
Online 12 July 27	<i>Health Policy (1/2)</i> Read Chapter 13	<b>Work on Team Project #2</b>
Exec #3 July 31	<b>Project 2 Team Presentations and discussion</b>	<b>All Pres. Due (In Class)</b>
Online 13 August 3	<b>Self-Study: No class post Executive Session #3</b> <i>Health Policy (2/2)</i> Read Chapter 13	<b>Work on Project #3</b>
Online 14 August 10	<i>The Future of Healthcare and Services</i> Read Chapter 14	<b>Work on Project #3</b>
<b>Final Week No Class</b>	<b>Project 3 due before the end of the semester (April 23)</b>	<b>Project #3 Due August 17</b>

# Resources for this Course

## General Resources

### Healthcare: Electronic Journals

[Alternative Health News Online](http://www.altmedicine.com/) - <http://www.altmedicine.com/>  
[American Medical Association Publications](http://www.ama-assn.org/scipub.htm) - <http://www.ama-assn.org/scipub.htm>  
[BMJ: British Medical Journal](http://www.bmj.com/) - <http://www.bmj.com/>  
[Harvard Health Publications](http://www.countway.med.harvard.edu/publications/Health_Publications/.index.html) -  
[http://www.countway.med.harvard.edu/publications/Health\\_Publications/.index.html](http://www.countway.med.harvard.edu/publications/Health_Publications/.index.html)  
[Healthy Ideas](http://www.healthyideas.com/) - <http://www.healthyideas.com/>  
[JAMA](http://jama.ama-assn.org/) (Journal of the American Medical Association) - <http://jama.ama-assn.org/>  
[The Lancet](http://www.thelancet.com/) - <http://www.thelancet.com/>  
[MedWebPlus: Electronic Publications](http://www.medwebplus.com/subject/Electronic_Journals.html) - [http://www.medwebplus.com/subject/Electronic\\_Journals.html](http://www.medwebplus.com/subject/Electronic_Journals.html)  
[New England Journal of Medicine](http://www.nejm.org/) - <http://www.nejm.org/>  
[Reuters Health Information Services](http://www.reutershealth.com/) - <http://www.reutershealth.com/>

### Healthcare: Gateways

[About.com Health/Fitness Directory](http://home.about.com/health/) - <http://home.about.com/health/>  
[BioSites: A Virtual Catalog of Selected Internet Resources in the Biomedical Sciences](http://www.library.ucsf.edu/biosites/) -  
<http://www.library.ucsf.edu/biosites/>  
[Bookmarks for Best Medical and Health Resources](http://www.infopeople.org/Wksp/Past/1999/Medical/medbkmrks.htm) -  
<http://www.infopeople.org/Wksp/Past/1999/Medical/medbkmrks.htm>  
[Health Information Resources](http://nhic-nt.health.org/AlphaKeyword.htm) - <http://nhic-nt.health.org/AlphaKeyword.htm>  
[HealthWorld Online](http://www.healthy.net/) - <http://www.healthy.net/>  
[MARTINDALE'S HEALTH SCIENCE GUIDE](http://www-sci.lib.uci.edu/HSG/Medical.html) - <http://www-sci.lib.uci.edu/HSG/Medical.html>  
[Medical Matrix](http://www.medmatrix.org/) - <http://www.medmatrix.org/>  
[Medline Plus](http://www.nlm.nih.gov/medlineplus/) - <http://www.nlm.nih.gov/medlineplus/>  
[MedMarks: Medical Bookmarks](http://medmark.org/) - <http://medmark.org/>  
[MedWebPlus](http://medwebplus.com/subject/) - <http://medwebplus.com/subject/>  
[NOAH](http://www.noah-health.org/) - <http://www.noah-health.org/>  
[Open Directory: Health](http://dmoz.org/Health/) - <http://dmoz.org/Health/>

### Healthcare: Medical Databases

[CHID](http://chid.nih.gov/) - <http://chid.nih.gov/>  
[Clinical Trials](http://clinicaltrials.gov/ct/gui/c/b) - <http://clinicaltrials.gov/ct/gui/c/b>  
[Health Hippo](http://hippo.findlaw.com/) - collection of policy and regulatory materials related to health care -  
<http://hippo.findlaw.com/>  
[Medline](http://www.healthy.net/Library/Search/Medline.asp) - <http://www.healthy.net/Library/Search/Medline.asp>  
[PubMed](http://www.ncbi.nlm.nih.gov/PubMed/) - <http://www.ncbi.nlm.nih.gov/PubMed/>

### Healthcare: Medical Reference

[Acronyms and Initialisms for Health Information Resources](http://www.geocities.com/~mlshams/acronym/acr.htm) -  
<http://www.geocities.com/~mlshams/acronym/acr.htm>  
[Centers for Disease Control and Prevention](http://www.cdc.gov/) - <http://www.cdc.gov/>  
[Joint Commission on Accreditation of Healthcare Organizations](http://www.jcaho.org/) - <http://www.jcaho.org/>

### Healthcare: Research & Clinical Guidelines

[Agency for Healthcare Research and Quality](http://www.ahrq.gov/) (AHRQ) - <http://www.ahrq.gov/>  
[Centers for Disease Control and Prevention](http://www.cdc.gov/) - <http://www.cdc.gov/>  
[Food & Drug Administration](http://www.fda.gov/) - <http://www.fda.gov/>

[National Guideline Clearinghouse](http://www.guideline.gov/) - <http://www.guideline.gov/>  
[Office for Human Research Protections \(OHRP\)](http://ohrp.osophs.dhhs.gov/) - <http://ohrp.osophs.dhhs.gov/>

## Journals and Books

### Healthcare: Cost, Management and Technology

Abernethy, M. A. and A. M. Lillis. 2001. Interdependencies in organization design: A test in hospitals. *Journal of Management Accounting Research* (13): 107-129.

Alexander, J. A., M. L. Fennell and M. T. Halpern. 1993. Leadership instability in hospitals: The influence of board-CEO relations and organizational growth and decline. *Administrative Science Quarterly* 38(1): 74-99.

Alexander, J. W. and W. A. Randolph. 1985. The fit between technology and structure as a predictor of performance in nursing subunits. *The Academy of Management Journal* 28(4): 844-859.

Alford, R. R. 1974. Research note: Problems of data and measurement in interorganizational studies of hospitals and clinics. *Administrative Science Quarterly* 19(4): 485-490.

Alutto, J. A. and D. J. Vredenburg. 1977. Characteristics of decisional participation by nurses. *The Academy of Management Journal* 20(2): 341-347.

Anisfeld, M. H. 1994. Validation- How much can the world afford? Are we getting value for money? *PDA Journal of Pharmaceutical Science & Technology* (Jan-Feb): 45-48.

Arnaboldi, M. and I. Lapsley. 2004. Modern costing innovations and legitimation: A health care study. *Abacus* 40(1): 1-20.

Aspinall, M. G. and R. G. Hamermesh. 2007. Realizing the promise of personalized medicine. *Harvard Business Review* (October): 108-117.

Bain, C. E., A. I. Blankley and D. A. Forgione. 2001. The Methodist Hospital system: Tax exemption and charitable responsibilities of not-for-profit hospitals. *Issues In Accounting Education* (February): 67-97.

Baker, J. J. and R. W. Baker. 2000. *Health Care Finance: Basic Tools for Nonfinancial Managers*. Aspen Publishers, Inc.

Bast, J. L., R. C. Rue and S. A. Wesbury Jr. 1993. *Why we spend too much on Health Care and what we can do about it*. Heartland Institute.

Brown, T. 2008. Design thinking. *Harvard Business Review* (June): 84-92.

Carr, L. P. 1993. Unbundling the cost of hospitalization. *Management Accounting* (November): 43-48.

Chase, S. F. 1976. Is hospital accounting different? *Management Accounting* (March): 39-40.

Edmondson, A. C., R. M. Bohmer and G. P. Pisano. 2001. Disrupted routines: Team learning and new technology implementation in hospitals. *Administrative Science Quarterly* 46(4): 685-716.

Flower, J. 2004. The healthcare cost crisis: What must be done. *Cost Management* (November/December): 23-33.

Ittner, C. D., D. F. Larcker and M. Pizzini. 2007. Performance-based compensation in member-owned firms: An examination of medical group practices. *Journal of Accounting and Economics* (December): 300-327.

Jacobs, K., G. Marcon and D. Witt. 2004. Cost performance information for doctors: An international comparison. *Management Accounting Research* (September): 337-354.

Keller, T. F. and D. J. Laughhunn. 1973. An application of queuing theory to a congestion problem in an outpatient clinic. *Decision Sciences* 4(3): 379-394.

Neumann, B. R., M. Crowdes and D. Neumann. 2009. Performance measures in long-term care: Modeling weekend effects and reporting errors. *Cost Management* (March/April): 29-39.

Porter, M. E. and E. O. Teisberg. 2004. Redefining competition in health care. *Harvard Business Review* (June): 65-76.

Preston, A. M., W. F. Chua and D. Neu. 1997. The diagnosis-related group-prospective payment system and the problem of the government of rationing health care to the elderly. *Accounting, Organizations and Society* 22(2): 147-164.

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