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Fichman, Kohli, and Krishnan: Editorial Overview 420 Information Systems Research 22(3), pp. 419-428, ©2011 INFORMS The Stakes Are Life and Death Healthcare in?uences the quality of our lives and how we function within the society.

The Role of Information Systems in Healthcare: Current ...

Small savings quickly mount up. At the same time, we spend a lot of time in our lives doing stuff that is not very useful. For example, every day most people spend two or more hours on social media. Reducing useless tasks or at least doing them more efficiently can free up huge amounts of time for what's important.

How to Do a Time and Motion Study to Make Real Change

We can keep our pools safe, healthy, and most importantly fun... Look after your health at harvest time (slideshow) Farmer health, wellbeing and safety are often neglected when facing the pressures of harvest. Simple safety measures can dramatically reduce the risk of injury and illness... Medicines - safety issues

Farm safety and handling agrichemicals - Better Health Channel

Dr Becky Spelman, has been instrumental in giving a new lease to my life. I was suffering for 30 years with PD & Agoraphobia. She had a road-map of 6 months to take me from my limited movement of 20 kms radius from my home; to make me FLY (over 10 hours flight) She is very professional, a subject matter expert, she understands the challenge faced by the patient, has the HUMAN TOUCH, and a ...

This report is based on an exhaustive review of the published literature on the definitions,

measurements, epidemiology, economics and interventions applied to nine chronic conditions and risk factors.

Randomized clinical trials are the primary tool for evaluating new medical interventions. Randomization provides for a fair comparison between treatment and control groups, balancing out, on average, distributions of known and unknown factors among the participants. Unfortunately, these studies often lack a substantial percentage of data. This missing data reduces the benefit provided by the randomization and introduces potential biases in the comparison of the treatment groups. Missing data can arise for a variety of reasons, including the inability or unwillingness of participants to meet appointments for evaluation. And in some studies, some or all of data collection ceases when participants discontinue study treatment. Existing guidelines for the design and conduct of clinical trials, and the analysis of the resulting data, provide only limited advice on how to handle missing data. Thus, approaches to the analysis of data with an appreciable amount of missing values tend to be ad hoc and variable. The Prevention and Treatment of Missing Data in Clinical Trials concludes that a more principled approach to design and analysis in the presence of missing data is both needed and possible. Such an approach needs to focus on two critical elements: (1) careful design and conduct to limit the amount and impact of missing data and (2) analysis that makes full use of information on all randomized participants and is based on careful attention to the assumptions about the nature of the missing data underlying estimates of treatment effects. In addition to the highest priority recommendations, the book offers more detailed recommendations on the conduct of clinical trials and techniques for analysis of trial data.

The analysis and sorting of large numbers of cells with a fluorescence-activated cell sorter (FACS) was first achieved some 30 years ago. Since then, this technology has been rapidly developed and is used today in many laboratories. A Springer Lab Manual Review of the First Edition: "This is a most useful volume which will be a welcome addition for personal use and also for laboratories in a wide range of disciplines. Highly recommended." CYTOBIOS

The #1 New York Times bestseller! Now a Hulu original series starring Reese Witherspoon and Kerry Washington. "I read *Little Fires Everywhere* in a single, breathless sitting." --Jodi Picoult "To say I love this book is an understatement. It's a deep psychological mystery about the power of motherhood, the intensity of teenage love, and the danger of perfection. It moved me to tears." --Reese Witherspoon "Extraordinary . . . books like *Little Fires Everywhere* don't come along often." --John Green From the bestselling author of *Everything I Never Told You*, a riveting novel that traces the intertwined fates of the picture-perfect Richardson family and the enigmatic mother and daughter who upend their lives. In *Shaker Heights*, a placid, progressive suburb of Cleveland, everything is planned--from the layout of the winding roads, to the colors of the houses, to the successful lives its residents will go on to lead. And no one embodies this spirit more than Elena Richardson, whose guiding principle is playing by the rules. Enter Mia Warren--an enigmatic artist and single mother--who arrives in this idyllic bubble with her teenaged daughter Pearl, and rents a house from the Richardsons. Soon Mia and Pearl become more than tenants: all four Richardson children are drawn to the mother-daughter pair. But Mia carries with her a mysterious past and a disregard for the status quo that threatens to upend this carefully ordered community. When old family friends of the Richardsons attempt to adopt a Chinese-American baby, a custody battle erupts that dramatically divides the town--and puts Mia and Elena on opposing sides. Suspicious of Mia and her motives, Elena is determined to uncover the secrets in Mia's past. But her obsession will come at unexpected and devastating costs. *Little Fires Everywhere* explores the weight of secrets, the nature of art and identity, and the ferocious pull of motherhood--and the danger of believing that following the rules can avert disaster. Named a Best Book of the Year by: People, The Washington Post, Bustle, Esquire, Southern Living, The Daily Beast, GQ, Entertainment Weekly, NPR, Amazon, Barnes & Noble, iBooks, Audible, Goodreads, Library Reads, Book of the Month, Paste, Kirkus Reviews, St. Louis Post-Dispatch, and many more... Perfect for book clubs! Visit [celesteng.com](http://celesteng.com) for discussion guides and more.

Official, original James Bond from a writer described by Len Deighton as a 'master storyteller'. 'Take care 007. Take special care. The continent's a hotbed of villainy these days and you can never be too careful.' Bond was supposed to be on leave. But SPECTRE leader Tamil Rahani, dying from injuries suffered at Bond's hand, is determined to make it the holiday to die for. With a price on his head, Bond must evade the world's greatest assassins in a ruthless game of cat-and-mouse across Europe, while trying to save the lives of the two women who matter to him most, his housekeeper May and Miss Money Penny. But Bond has been a target before. And when it comes to staying alive, nobody does it better than 007. In *Nobody Lives Forever*, the fifth in Gardner's bestselling series, Fleming's superspy is at the top of his game.

The U.S. health care system is in crisis. At stake are the quality of care for millions of Americans and the financial well-being of individuals and employers squeezed by skyrocketing premiums--not to mention the stability of state and federal government budgets. In *Redefining Health Care*, internationally renowned strategy expert Michael Porter and innovation expert Elizabeth Teisberg reveal the underlying--and largely overlooked--causes of the problem, and provide a powerful prescription for change. The authors argue that competition currently takes place at the wrong level--among health plans, networks, and hospitals--rather than where it matters most, in the diagnosis, treatment, and prevention of specific health conditions. Participants in the system accumulate bargaining power and shift costs in a zero-sum competition, rather than creating value for patients. Based on an exhaustive study of the U.S. health care system, *Redefining Health Care* lays out a breakthrough framework for redefining the way

competition in health care delivery takes place—and unleashing stunning improvements in quality and efficiency. With specific recommendations for hospitals, doctors, health plans, employers, and policy makers, this book shows how to move health care toward positive-sum competition that delivers lasting benefits for all.

This volume, developed by the Observatory together with OECD, provides an overall conceptual framework for understanding and applying strategies aimed at improving quality of care. Crucially, it summarizes available evidence on different quality strategies and provides recommendations for their implementation. This book is intended to help policy-makers to understand concepts of quality and to support them to evaluate single strategies and combinations of strategies.

Interpersonal rejection ranks among the most potent and distressing events that people experience. Romantic rejection, ostracism, stigmatization, job termination, and other kinds of rejections have the power to compromise the quality of people's lives. As a result, people are highly motivated to avoid social rejection, and, indeed, much of human behavior appears to be designed to avoid such experiences. Yet, despite the widespread effects of real, anticipated, and even imagined rejections, psychologists have devoted only passing attention to the topic, and the research on rejection has been scattered throughout a number of psychological subspecialties (e.g., social, clinical, developmental, personality). In the past few years, however, we have seen a surge of interest in the effects of interpersonal rejection on behavior and emotion. The goal of this book is to pull together the contributions of several scholars whose work is on the cutting edge of rejection research, providing a scholarly yet readable overview of recent advances in the area. In doing so, it not only provides a look at the current state of the area but also helps to establish the topic of rejection as an identifiable area for future research. Topics covered in the book include: ostracism, unrequited love, betrayal, stigmatization, rejection sensitivity, rejection and self-esteem, peer rejection in childhood, emotional responses to rejection, and personality moderators of reactions to rejection.

This book demonstrates how to successfully manage and lead healthcare institutions by employing the logic of business model innovation to gain competitive advantages. Since clerk-like routines in professional organizations tend to overlook patient and service-centered healthcare solutions, it challenges the view that competition and collaboration in the healthcare sector should not only incorporate single-end services, therapies or diagnosis related groups. Moreover, the authors focus on holistic business models, which place greater emphasis on customer needs and put customers and patients first. The holistic business models approach addresses topics such as business operations, competitiveness, strategic business objectives, opportunities and threats, critical success factors and key performance indicators. The contributions cover various aspects of service business innovation such as reconfiguring the hospital business model in healthcare delivery, essential characteristics of service business model innovation in healthcare, guided business modeling and analysis for business professionals, patient-driven service delivery models in healthcare, and continuous and co-creative business model creation. All of the contributions introduce business models and strategies, process innovations, and toolkits that can be applied at the managerial level, ensuring the book will be of interest to healthcare professionals, hospital managers and consultants, as well as scholars, whose focus is on improving value-generating and competitive business architectures in the healthcare sector.

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