

A Voice of Permanente

Each Permanente Medical Group grew locally through the personal character of the physicians and providers of that region. However, their medical practice philosophy of a health maintenance organization unified them nationally. Each day, in the hospitals and clinics, they worked out what we recognize as "Permanente practice." On some of those days they mused about a greater connection with those across the country. It was a yearning to share their experience, to learn from others, to improve the care they delivered to the people they served. This "Voice of Permanente" can be heard in the comments of physicians and providers applying for the Review Board of a new national journal, and in the physician focus groups across the country. The editorial team sought their advice about a new venture in a time of unprecedented change. In this foreword I would like you to hear your Permanente voice as I describe the evolution, the purpose, the value, and the aspirations of your **Permanente Journal**.

The **Permanente Journal** has grown into a national publication from roots in newsletters produced by many clinicians. Three years ago in the Northwest we consolidated several newsletters, including **Permanente Practice**, into the **NWP Journal of Clinical Practice**. Our clinician readers found more than their favorite newsletter within the *Journal*. As they read across the pages into different disciplines, they found value in other people's ideas, experiences and practices. We took this learning to the Regional Medical Directors in the form of a proposal for a national journal. If sharing "Permanente practice" was valuable regionally, then this conversational process interregionally could create superior value to enhance learning, accelerate progress, and reduce practice variation. *"I am delighted the PMGs are putting together a journal to allow us to share our ideas."* *"Permanente talent will create a readership beyond our walls."*

The process of selecting Review Board editors revealed to me, in the impassioned words people wrote, the enormous value of Permanente physicians and providers. *"Permanente is a group with tremendous resourcefulness, creativity, and care-full-ness in meeting the challenges ahead, but we need to share amongst ourselves much more effectively and efficiently."* *"Permanente has unique practices, skills, and knowledge to share."* The daunting task of narrowing the field of reviewers became inspirational for me as I recognized how so many people felt so strongly about the need for a national journal. *"A multidisciplinary journal is exciting and creative, and a unique experience."* *"I am keenly interested in the success of this journal."* *"This journal can showcase our best work and practices, strengthen the connection among groups, and influence the direction and nature of change in the practice and business of healthcare."* Along with these thoughts came a resolve to make it work. *"I am extremely interested in the quality of medicine and dedicated to Kaiser Permanente."* *"I have a long-term commitment to the highest individual, department, and group standards for Kaiser Permanente."* *"Practicing clinical physicians have a responsibility to contribute."* *"I want to make a real contribution."*

These and other like statements are directly aligned with achieving Kaiser Permanente Program goals of improved quality and service and reduced cost. Foremost was the recognition and importance of the patients we serve. *"The Journal must promote and support the goal of bringing increased value to our members and communities."* *"I have an interest in influencing healthy choices for patients."* *"I have a strong interest in patient satisfaction and well-being."* To achieve this end, a journal, its contributors, and its content has to meet certain high standards. *"Encourage critical thinking in day-to-day clinical practice, and encourage the description of clinical experience in a managed care setting."* *"KP has an obligation to promote research into clinical practices and set the standards and communicate through an organ such as the Journal."* *"The Journal can promote our organization's place in research excellence."* Several people spoke of its direct value for clinicians. *"To encourage and promote scholarship in Kaiser Permanente."* *"Remain on top of advances 'on the horizon'."* *"Keeping current is vital to improve quality and service to improve patient outcomes."*

To quote Senge's Fifth Discipline Fieldbook, *"Buckminster Fuller used to say if you want to teach people a new way of thinking, give them a tool, the use of which will lead to new ways of thinking."* The **Permanente Journal** is that tool. In the focus groups, physicians spoke about what this **Journal** could and should be like. *"We don't want another **New England Journal of Medicine**, and we don't want a 'throwaway' journal. We want something 'midway'."* As they struggled to give that concept definition, they continually used the words "practical," "usable," "readable," and "concise." They wanted something different yet were troubled with the idea of a journal "in the middle"—that it might be insubstantial. To me, a middle ground of significant substance and consequence is a journal that is "practice-based," "evidence-based," "experience-focused," and "innovation-driven." That is Permanente practice. *"A description of clinical experience in a managed care setting."*

As much as clinicians need and seek information they can use today in their practice, they desperately want a forum and a vehicle to connect them with each other. And through a journal, people can converse. Associated with their yearning for a national connectedness and community is a realization that "Permanente practice" is a larger concept that meaningfully describes the future of managed health care. *"Kaiser Permanente is developing systems of health care for the future."* From a seemingly peripheral group in traditional, mainstream medicine, Permanente has become a centerpiece, an experienced core, and now a large national group with a growing voice of great inherent strength and presence.

One physician prompted another perspective. *"I want to serve because of my interest in the well-being of Kaiser Permanente."* This suggests an organization as a living entity, a viable organism. It is this biological "systems thinking" view—a holistic perspective—that is necessary to explore and grow the interrelatedness and interdependency of the parts of Kaiser Permanente. Our relationships, as



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partners with our patients, as partners with Health Plan, and as interregional Permanente physicians and providers, will create for us "a whole" that is one of our sustainable competitive advantages.

The organizational image we create matters for ourselves, for our members, and for our competitors in the marketplace. **The Permanente Journal** has the power to unify and bring to a larger level what people feel in their local regions. Communicating with a national voice, now essential, is possible. Members of the Advisory Board, Review Board, and Editorial Team have a responsibility to carry forward the energy, enthusiasm, commitment, dedication, long-standing effort and work, aspirations, and dreams of all physicians, providers, and Health Plan experts so invested in Kaiser Permanente.

Clinical Contributions

Clinical articles on the practice of medicine within The Permanente Medical Groups and their affiliates. Article topics may include reviews of successful practices, programs and policies, and analyses of new techniques.

Phillip M. Brenes, MD, Editor

As Executive Editor for the former **Northwest Permanente Journal of Clinical Practice**, the model for this publication, it has been my pleasure to participate in the design and formulation of this **Journal** and to act as the Associate Editor for this, the Clinical Contributions Section for the inaugural issue. Starting with the next issue, however, Dr. Arthur Klatsky from The Permanente Medical Group (Northern California) will take over as the Associate Editor for this section.

The Clinical Contributions Section of this **Journal** will feature articles that apply directly to the actual clinical practice of medicine in Kaiser Permanente. Articles in this section may include reviews, applications of new technologies to clinical practice, clinical observations and anecdotes, case presentations, experiences with successful practices, and other discussions relating to seeing and caring for patients. Because our collective clinical experience, interests, and expertise are immense, we want to provide a variety of clinical articles that will give you the opportunity to examine, evaluate, compare, explore, review, and/or ponder.

Given the enthusiastic response from so many of our clinicians wanting to contribute and participate in this enterprise, there should be great opportunity for all of us to share and learn from each other.

Original Research

This section features Kaiser Permanente's research contributions through original, empirically based research in areas of great clinical importance. This includes outcomes research, studies that use Kaiser Permanente databases, and rigorous evaluations of best practices and innovations in clinical care.

Mary Durham, PhD, Editor

There has been a great deal of discussion about whether to have an original research section for **The Permanente Journal**. Some people have told us that good research will always go to one of the major research journals. I have been a voice for having a Research Section because I believe **The Permanente Journal** is a place where clinicians and researchers can publish important articles which inform us about clinical practice within Kaiser Permanente. It is certainly true that such articles will also be published elsewhere. However, I hope the Research Section inspires clinicians to analyze their practices in a rigorous fashion and to share their findings with their colleagues. I hope you'll send us articles for consideration and that you'll let us know about the important research you are doing—regardless of where it is eventually published.

Health Systems Management

This section features articles from a "systems" perspective, recognizing that medicine is practiced in the larger context of health care, involving ambulatory care delivery, hospital strategy, program expansion, and network development; and supported by information technology and the Internet. Growth in this system occurs through the leadership, education, and development of clinicians.

Lee Jacobs, MD, Editor

In the spirit of this inaugural issue of **The Permanente Journal**, I am very pleased to introduce this section of the **Journal** titled, Health Systems Management.

top PHILLIP M. BRENES, MD is a Pediatrician for Northwest Permanente, PC (NWP) in Portland, Oregon.

bottom left MARY DURHAM, PhD is the Director of the Kaiser Permanente Center for Health Research in Portland, Oregon.

bottom right LEE JACOBS, MD is the Associate Medical Director of Professional Development for the Southeast Permanente Medical Group, Inc. (SEPMG) in Atlanta, Georgia.



It was clear to me in reviewing the early work of the founders of this publication that they had a very good understanding of the value of the Permanente community. They understood that Kaiser Permanente's real competitive advantage, the Program's major asset, if you will, is the quality of the Permanente clinical care supported by a unique physician-led practice environment. The Health Systems Management Section will focus on the latter, our practice environment in which physician leadership plays the crucial role.

Specific areas of focus of this section will include leadership development, educational programs, ambulatory care delivery, Program expansion, network development, and information technology. While our challenges in these areas may be similar, our approaches and experiences may be quite different. The transferring of this knowledge is our objective. In essence, this section will provide an opportunity for the Permanente community to have a literary dialogue, so important if we are to learn and grow as Medical Groups.

At times, while reading this section, you will be somewhat consoled in learning that we are all encountering the same barriers as we refine our practices. You will also be excited about the learnings that you can derive as other Permanente groups share their experiences. Most of all, I believe that you will read with pride the steps that Permanente groups are taking to meet the everyday challenges that they encounter. Quality Permanente people sharing amazing innovations, that is what the Health Systems Management section will be all about.

External Affairs

This section features nonclinical articles on external issues related to the practice and perception of Permanente medicine. These may include articles by customers and consumer groups, as well as internally generated articles on health policy, the media, the marketplace, and our social mission.

Scott Rasgon, MD, Editor

It is with great pleasure that I introduce the External Affairs Section of **The Permanente Journal**. The articles in this section range from an article by David Pratt of General Electric Power Systems, *"The Health Care Dynamic from a Physician-Purchaser Perspective,"* to an article by Jim Gersbach of Kaiser Permanente Northwest Division, *"Media Training for Physicians."*

I invite everyone inside and outside the Medical Groups with a perspective on how our health care program is viewed from the outside or how we from

the inside mirror this perspective to contribute to the External Affairs Section. Our health care program viewed from the outside and how we shape this view are what this section is about.

Abstracts

This section features abstracts from articles published in other journals, preferentially featuring the works of Permanente physicians, and abstracts of books written by Permanente physicians. Some abstracts may be coupled with a critical commentary.

Mary Durham, PhD, Editor

Kaiser Permanente is fortunate to have hundreds of gifted researchers who routinely contribute to the medical literature. We plan to reprint abstracts which represent a broad range of topics, from a variety of geographic locations, by a diverse group of authors. It is clear from just our first edition that we will have to make some tough choices in order to cut across a wide range of interests and expertise.

We are now in the process of creating a method to identify published research through electronic and other means. Please send us articles that have been published so that the abstract can be considered for republication. Abstracts of books written by Permanente physicians which are related to health care will also be printed. Authors are urged to alert us to publication of their work.

A Moment in Time

A look back at milestones in the history of the Permanente Medical Groups.

Ek Ursin, MD, Emeritus Editor

The mandate of our column A Moment in Time, is to look back at milestones of the Permanente Medical Groups. Later in this issue the inaugural article by Dr. Greenlick gives us an overview of how we, the erstwhile pariah of health providers, became the envied and most copied model of American health care. The paper ends with a propitious outlook on the future, if we remain true to our social mission and accept the present-day challenges with an "if not us, then who?" attitude.

What we will print in the future will to a significant extent depend on you, your critique, and occasionally your praise. If you'd like to contribute, send us an outline (preferably on disk) of a story that will tie our past to Kaiser Permanente's present and future.

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