

Griffiths Medal – Previous Winners

- [2019-20](#) - Terry Young, Sada Soorapanth, Jim Wilkerson, Lance Millburg, Todd Roberts, David Morgareidge
- [2017-18](#) - Victoria Mabin, Julie Yee, Sally Babington, Robyn Moore and Vanessa Caldwell
- [2015-16](#) - Mihail Mihaylov, Pieter Smet, Wim Van Den Noortgate and Greet Vanden Berghe
- [2013-14](#) - Holly O Witteman, James E Stahl

Citations

Citation for Griffiths Medal 2019-20

Terry Young, Sada Soorapanth, Jim Wilkerson, Lance Millburg, Todd Roberts, David Morgareidge

The costs and value of modelling-based design in healthcare delivery: five case studies from the US.

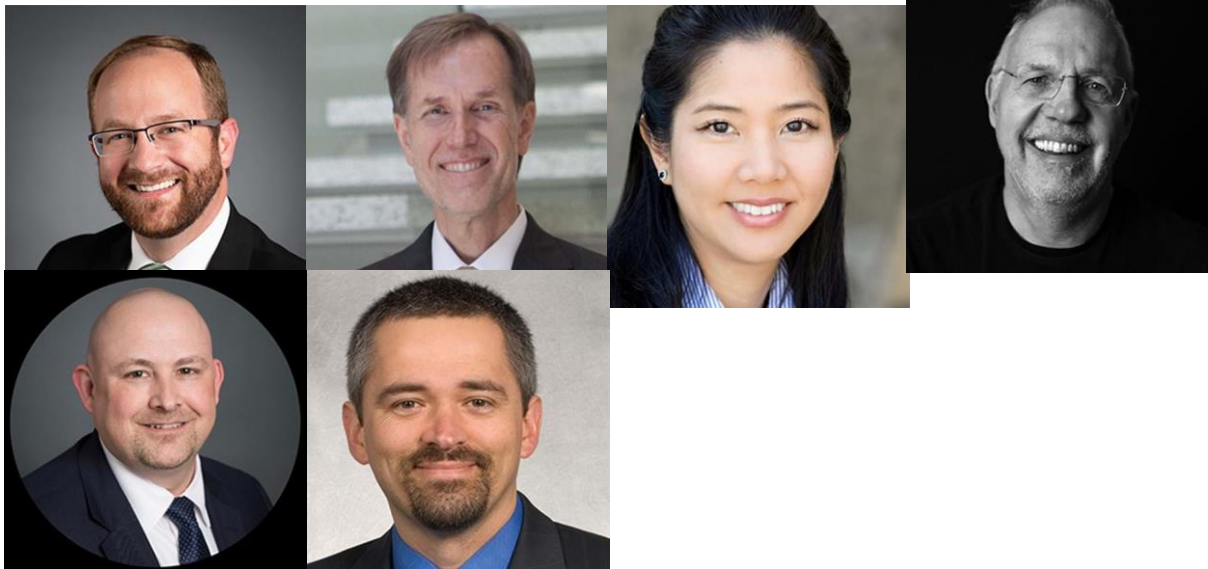
Health Systems 9(3) 253-262

<https://doi.org/10.1080/20476965.2018.1548255>

Assessment of the impact of modelling on decisions in healthcare management has not been sufficiently studied and where it has been it has tended to indicate a disappointing picture. This clear and concise paper helps redress both those problems by analysing the costs of modelling and the savings resulting from a number of healthcare management decisions that were based on simulation results.

It demonstrates that modelling can make powerful contributions to shaping the design of health care systems, improving their cost-effectiveness to an extent that can hugely outweigh the costs of the modelling.

The paper should encourage analysts to more regularly assess the impact and cost-effectiveness of their work and managers to make more use of modelling to improve health care systems.



Left to right: Lance Millburg, David Morgareidge, Sada Soorapanth, Terry Young, Todd Roberts, Jim Wilkerson

Citation for Griffiths Medal 2017-18

Victoria Mabin, Julie Yee, Sally Babington, Robyn Moore and Vanessa Caldwell

Using the Theory of Constraints to resolve long-standing resource and service issues in a large public hospital.

Health Systems Vol.7 (3): 230-249

This year's medal is awarded to Victoria Mabin, Julie Yee, Sally Babington, Robyn Moore and Vanessa Caldwell of whom are based in New Zealand. This paper considers a major issue for healthcare; managing demand for services, within limited resources. The study is based on an approach (Theory of Constraints) with strong "real world" relevance that is relatively little used in the OR field and merits wider exposure and comparison with other approaches to investigating systems. The use of TOC methodology in the study, which focuses on problems with a hospital pharmacy and the relation of these to the wider hospital system, facilitates drilling down to the underlying issues and allows a "rich" analysis of problems and solutions. The account of the associated pilot project provides additional insights and shows commitment to involving stakeholders in the work, and shows clear evidence of implementation with a considerable and sustained impact on system performance. The paper is clearly written and presented.



Vicky Mabin, Julie Yee, Sally Babington, Vanessa Caldwell and Robyn Moore

Citation for Griffiths Medal 2015-16

Mihail Mihaylov, KU Leuven, Belgium; Pieter Smet, KU Leuven, Belgium; Wim Van Den Noortgate, KU Leuven, Belgium; Greet Vanden Berghe, KU Leuven, Belgium

Facilitating the transition from manual to automated nurse rostering

Health Systems, (2016) 5 (2), 120-131

<https://doi.org/10.1057/hs.2015.12>

Nurses form a major part of any hospital workforce and deploying them efficiently is a key managerial task. Producing good rosters for nursing staff is a crucial but challenging part of achieving their efficient deployment. The paper takes an innovative systemic approach to real world rostering by considering some crucial but often overlooked wider factors that inhibit the implementation of automated rostering systems: the resource and other costs of change from manual rostering. It presents an ingenious analytical approach to reduce these transition barriers, by automating key elements of the change process itself. The paper describes the development and use of an analytical method that can infer, from past schedules, priorities for meeting different objectives of rosters and thus avoid the need for their manual input, which forms a significant part of the effort in a changeover to automated rostering. The method was developed in close liaison with senior hospital nurses and has been tested and validated by them, and can produce results that are both consistent with their objectives and superior to those from manual rostering. In keeping with its focus on implementation challenges, the method is being implemented in a hospital setting and has been incorporated into commercial rostering software. The paper is clearly written and is accessible to non-specialists.



Pieter Smet with Jeff Griffiths

Citation for Griffiths Medal 2013-14

Holly O Witteman, Quebec, Canada; James E Stahl, Dartmouth, USA

Facilitating interdisciplinary collaboration to tackle complex problems in health care: report from an exploratory workshop

Health Systems, (2013) 2 (3), 162–170

<https://doi.org/10.1057/hs.2013.3>

This innovative paper presents a disciplined exploration of four very different workshop techniques for facilitating interdisciplinary collaboration for solving complex problems in healthcare. Using case studies of typical complex, intractable, healthcare problems it highlights a number of important but often inadequately recognised aspects of health systems work, particularly the need to allow for different perspectives, to integrate analytical and design approaches to problem structuring and solving, and to exploit visual and other aids to creativity. The work has already been applied and the tools should help a range of professionals in both the Health IS and the OR community enhance their capability to tackle complex problems in health care.



Holly Witteman