There is a substantial body of research, describing shortfalls in the current provision of healthcare. Key issues emerging from this literature are significant variations in the quality of healthcare and risk of iatrogenic harm. On the other hand, there has been considerable progress in information technology effectuating a high capacity to exploit technological developments in relation to aspects of healthcare provision. Moreover, glimpses of future healthcare establish a wider use of nanotechnology, individualized drugs, cell-based computing and microchip-enhanced brains.

Notwithstanding the previously mentioned prospects, there has not been a systematic research and evaluation of the empirical literature on e-health applications and their impact on the quality and safety of healthcare delivery. Relevant theoretical, technical, developmental and policy literature has not been synthesized with a view to producing a definitive overview of the interaction.

The International Journal of Reliable and Quality E-Healthcare (IJRQEH) exploits a novel framework for revealing, understanding, modeling and implementing appropriate reliability and quality interventions leading to quality assurance and improvement. It addresses a variety of issues that relate to the quality and reliability assurance of e-healthcare, patient safety, patient empowerment, education on quality, e-medicine, and e-healthcare evaluation.

It aims to international leading edge research and best practice with a view to providing an interdisciplinary forum for the international debate on theoretical and practical aspects of quality, patient safety, and e-health interaction.

As a result, it supports students understand the effect of new technologies on health systems, helps healthcare professionals better understand their patients, acts as an assistant for patients to derive more benefits from their healthcare, and encourages e-health systems designers and managers to ground everyday practice on quality principles. Its target audience includes students, healthcare professionals, academics, researchers, managers, policy makers, and non-profit organizations.

The twelfth issue of the journal provides an overview of the topics of interest. Specifically, the first article refers to the long-standing Healthcare Information Systems (HIS) integration challenges that drove healthcare organizations to invest in new paradigms like Service Oriented Architecture (SOA). The article depicts the development of a conceptual SOA Governance Element entitled “Organizational Structures”. The element is part of a SOA Governance framework that includes nine distinctive elements with SOA Organizational Structures being one of the critical ones. The conceptualization of the proposed element is based on the authors’ previous research, grounded in the normative literature and further
developed to include healthcare aspects. The proposal is tested in a large Greek hospital utilizing qualitative methods. The second article argues that that incidence reduction of cervical cancer is achieved when quality assurance is implemented. Quality indicators are essential audit tools when implementing screening policies. Uniform indicators are used to monitor the general performance and to identify potential problems that may occur and jeopardize efforts. That way quality management is enabled and the assessment of the deviation from goals is facilitated. The paper presents the workflow of cervical cancer screening programs in respect to the quality and performance indicators required by the European Guidelines for Quality Assurance in Cervical Cancer Screening. It also proposes the appropriate data structures and entities that are required for a computerized system to support their calculation. The third article deals with the application of modern technology in daily practice. In particular, it examines the implementation of e-Government at the local level in the field of e-Health for exchanging information. The fourth article provides an overview of recent reforms in Greece as imposed by the fiscal adjustments. Potential harmful consequences of these vast healthcare reforms are also discussed, as a collateral victim of the recession, in which case the real “patient” is the overall healthcare system. It concludes that the financial crisis is a no easy way out, and the Greek healthcare system is challenged as both resources and demand are rapidly changing. What is yet to answer is whether these reforms, along with a co-existing rise in demand of health services, could jeopardize the quality of the system.

In conclusion, the twelfth issue confirms the journal’s impact, which could be summarized as follows:

- Probing into the interaction of quality and e-health;
- Providing essential information to assess e-health systems and services;
- Offering information about reliability modeling in e-health networks;
- Inquiring state of the art methods in quality, patient safety, patient empowerment and education in e-health;
- Describing reliable e-healthcare processes and policies.

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IJRQEH