EDITORIAL PREFACE

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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 leading-edge international 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 health care, 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 fourteenth issue of the journal provides an overview of the topics of interest. Specifically, the first article introduces an extended discourse representation structure CIDERS. This extension of the Discourse Representation Theory structures goes beyond the single text representation embracing the general clinical history of a given patient. The second article investigates the potential of image morphometry applied on cell nuclei and sequentially the use of a Classification and Regression Tree (CART) to identify morphometric features. The third article argues that digital management systems can help hospitals turn Green. The fourth article examines the contribution of ISO 9001:2008 and CEN/TS 15224: 2005 to Continuous Medical Education,

which changes health professionals' behavior, sharing fundamental goals of quality improvement. Finally, the fifth article argues that extant research falls short of capturing the motivations and expectations of multiple key stakeholders in a single study towards participating in mHealth pilots. To address this gap, a conceptual model is proposed and examined to explore the impact of motivations and expectations on both community health workers' and caregivers' decision to participate in mHealth pilot studies. Findings reveal that both motivations and expectations positively impact decision-making with no significant differences emerging between these two groups of stakeholders.

In conclusion, the fourteenth 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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