



From the Editor-in-Chief

Providers of healthcare – especially those ready to embrace e-health – will do well to consider Ronald R. Lindstrom’s warning that we need to change our old mindset about the health system and the role and relationships of its components. He thinks of healthcare as a complex adaptive organic system. The illustrations on the cover and accompanying the article help focus the reader. They support Lindstrom’s “lens of the ecosystem” as a way to view healthcare. These simple illustrations originally for “A Tree in a Forest” by Jan Thornhill — a children’s book published by Owl — clearly demonstrate the ecosystem’s complexity and inter-relationships with a flow that is never ending. This wonderful article should be read and re-read as you plan the evolving role of your hospital, your facility and your service.

From this macro view we move to a specific example of the new organization: the challenge of developing a telementoring program. We are taken through the process at the new Centre for Minimal Access Surgery based at St. Joseph’s Hospital in Hamilton. Mehran Anvari’s program in the practice of new laparoscopic techniques is being developed for a mentoring and telementoring program and finds itself with a number of unforeseen impediments; part of an evolving system and a necessary frustration we often face as we introduce change.

We also provide a perspective on organizing cancer care. Donald R. Carlow, who heads the British Columbia Cancer Agency describes the agency’s progress in developing a comprehensive system of cancer control. At first glance the organizational challenges do not seem to respond to Ronald R. Lindstrom’s vision of a fluid and flowing organization and so we invite our reader’s to respond. Administrators and directors alike should carefully analyze the works of both these thoughtful authors to assist them in their decision making roles.

These articles are timely forerunners to our “new models” series published in *HealthcarePapers*. This Fall look for a close examination of models to deliver homecare – especially with the evolving role of e-health. Then, in the following issue, we will closely examine medical errors and the gamut of implications for the system. For suggestions about these series and this exciting new journal I invite you to contact me at editors@longwoods.com

In our mission to provide you with best practices, we also point you to Relevant Research; a review of “Demanding Patients” by British authors Anne Rogers et al. which examines the “demand” for healthcare; a review of practical risk management; and a look at the need for more reform to Ontario’s mental healthcare. And we continue our column looking into the not-too-distant future of revolutionizing genetic medicine.

We also begin a series of conversations with interesting, emerging leaders. These profiles by Nova Scotia writer and publisher Cynthia Martin begin with Eric Meslin. Dr. Meslin, is one of two Canadians advising President Clinton on issues of bioethics. He points out the irony of their position as Canada does not have a national bioethics committee. Something to think about.

In fact the whole issue once again provides our readers with something to think about and, even more important, best practices to apply to the day-to-day management of our healthcare. We are pleased to provide you with such valuable tools.

Peggy Leatt, Ph.D.