



## Notes from the Associate Editor

**NORMALLY THE EDITOR-IN-CHIEF WOULD INTRODUCE THIS ISSUE** of *Healthcare Papers* at the front using the first available leaf. This journal, however, departs from the norm in many ways. First, it presents an important perspective without advocating the point of view of any particular interest group. The authors are experts whose authority comes from careful analysis and study of an issue or from deep personal experience, and who demonstrate a mastery of the material presented. Independently, they offer new ideas and original thinking to help establish an agenda for discussion. They report on cutting-edge research by academics, consultants, and management analysts. They give firsthand insight into how the system works, and how managers, the public and patients alike respond to demanding challenges faced on a daily basis. They provide best-practice models and hands-on techniques from healthcare providers around the world.

They receive little in the way of editorial guidance. The result is an open and candid discussion reflecting the curried thoughts of authors steeped in the development, administration and delivery of healthcare policy and programs.

Second, Peggy Leatt, the editor-in-chief, is one of three authors of the lead paper and removed herself from the role of editor for this issue. It was edited by the associate editor with valuable support from members of the editorial advisory board listed on the next page, and Dianne Foster Kent, our managing editor.

Third, one of the responding authors, Michael Decter, departed from the traditional format and penned a letter purportedly from a deputy minister of health to the premier of a province. We could not resist placing it before the lead paper. This, despite Decter's preference to be "part of the larger group of reactions to the excellent Leatt et al. piece."

Decter calls for bold actions to implement health system changes that place the patient first, and would restore public confidence at the same time. Fortunately, he provides a bold action plan. The plan is hard to ignore coming from a former deputy minister who is now a highly respected healthcare advisor, author and analyst, and chair of the Canadian Institute for Health Information.

We will look for a response from deputies, ministers and premiers and all our readers as they consider their policy options cognizant of the need to build professional, organizational, political and consumer readiness (see Shamian et al.) to put these policies in place. And that may be the toughest task of all.

In the process of making policy decisions readers may want to refer to our last issue which elegantly presents all sides of primary care reform, and they can look forward to our review of the sustainability of a publicly funded system – for release in June, 2000.

We would be pleased to publish comments in our next issue – even if the ministers are presented pseudonymously.

Tina Smith  
Associate Editor