



Notes from the Editor-in-Chief

SINCE THE INCEPTION OF THIS NEW JOURNAL I have been amazed by the creative and thoughtful viewpoints that have been expressed on each issue we have selected to put forward for debate.

This third set of papers lives up to the developing reputation of *HealthcarePapers* as an exciting publication that addresses topics of current urgency in a very timely manner. This well thought-out policy analysis should catch the attention of all health policymakers and strategists – even the “armchair” variety. As Duncan Sinclair points out there is no shortage of opinions and views on what should happen to our healthcare system; there are plenty of views about what is wrong and plenty of views about what should be fixed.

Dr. Sinclair then deftly analyses the situation and takes a very pragmatic approach to what should happen next. The respondents, in turn, are to be commended on the range of suggestions they have for changing the system. Several authors focus their discussion on the need to clarify Canadian values in relation to health services. In reply, Dr. Sinclair makes the important differentiation between health policy and health politics. As he points out, defining health policy is relatively easy and fun, but implementation of new policies falls in the realm of health politics and that is a different story. Implementation encroaches on the political agenda to such an extent that when even the most critical problem is debated the focus moves to a political deliberation rather than a substantive policy discussion.

It is not clear that more resources, more management, more doctors, more nurses, more of anything is what is needed or will actually produce change. I think we need a minimum understanding by federal and provincial ministers about what the issues are. Then a strategy must be developed, and urgently! The problem, as I see it, is that more resources will achieve little – the problem is that the design of the system is fundamentally flawed! Tinkering with the system is not enough. My experience at the Health Services Restructuring Commission in Ontario over the last two years basically reinforced my views that honouring the commitments to the key principles of the Canada Health Act – loved by all Canadians – can not be achieved without system redesign. This redesign should start with measures to enhance the health of the individual and the family. Next, it should move to the first call when medical care is required, i.e., the primary health care system. With this foundation in place, people will only move to other levels of care when absolutely necessary.

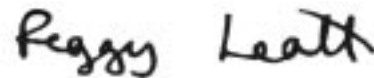
But, redesign is not enough. Financial and performance incentives must be put into place to trigger high-quality care at low costs. It can be done if the incentives are in place.

Yes, consumers want access to comprehensive services but what does that mean in today's environment? Surely not what it meant decades ago when medicare was being debated, and the goal was simply to ensure that each Canadian had access to a hospital bed and a doctor when medically necessary. I suggest that this issue of *HealthcarePapers* gets at the heart of Canadian values and provides an opportunity for us to rethink the design of health systems in Canada.

I call on all politicians to read these papers carefully. I call on all healthcare providers to not only read them but also to share them with colleagues and their political representatives! And, consumers should get the word out to everyone who might listen. This will make for constructive debate and then change will begin to take place.

I also encourage you to write to us with your comments and responses to this issue. Rethinking medicare is a topic we will return to as ideas and solutions evolve.

Read on . . .

A handwritten signature in black ink that reads "Peggy Leatt". The script is cursive and fluid, with the first name "Peggy" and last name "Leatt" clearly distinguishable.

Peggy Leatt
Editor-in-Chief

P.S. The last two issues of *HealthcarePapers* were reprinted and distributed well beyond our original targets. Electronic and paper versions of this issue and previous issues are available by contacting Barbara Marshall at 416 864-9667. She can be reached by email at subscriptions@longwoods.com.