

In this issue of *Healthcare Quarterly*, we feature two articles that focus on strategies for quality improvement. The first, by Pierre-Yves Crémieux, Pierre Fortin, Marie-Claude Meilleur, Terrence Montague and Jimmy Royer, is titled “The Economic Impact of a Partnership-Measurement Model of Disease Management: Improving Cardiovascular Outcomes in Nova Scotia.” This paper provides an analysis of a province-wide disease-management project that demonstrated a positive economic impact of investing in community and evidence-based health partnerships. The results showed the significant multiplier effect of a private-sector investment in the management of burdensome diseases for a whole population.

The second article, by Anu MacIntosh-Murray, of the University of Toronto, describes the challenges of implementing collaborative improvement in complex continuing care. The article discusses key points for organizations to consider before they engage in an improvement collaborative, based on participants’ views of what worked well and challenges they experienced, and suggestions about what they would do differently.

Next, we provide the fourth part in a series of articles by Joann Trypuc, Alan Hudson and Hugh MacLeod, of the Ontario Ministry of Health and Long-Term Care. The authors suggest that it is widely recognized that Ontario’s Wait Time Strategy is a significant change management initiative. But they raise the question of whether the province achieved the goal that it set out for itself in November 2004. The article begins with a brief overview of the major inputs or foundational building blocks of the strategy, and follows with a detailed analysis of the major outputs or outcomes of the strategy to date.

Wendy Nicklin and Gilles Lanteigne, of the Canadian Council on Health Services Accreditation, describe how the national accreditation program is undergoing a significant transformation. The article outlines the rationale for the changes, objectives, key enhancements, development process, critical path and key messages.

Sharon King and Larry Peterson, of Starfield Consulting, provide the second article in a series on how effective leaders achieve success in critical change initiatives. In this article, the authors focus on why change leadership must transcend project management for complex initiatives to be successful.

In our Ideas at Work section, we provide three different scenarios. Bill MacLeod and Murray Martin describe how Hamilton Health Sciences put cogeneration to work. Spanning three acute care hospitals and generating a combined total of 22.75 megawatts of electricity, Hamilton Health Sciences’ cogeneration plants address energy supply issues by offering a clean and reliable power source and offer the potential to generate revenue by selling excess electricity back to the province.

Thirumagal Kanagasabai, Loreta Muharuma, Joy McGuire, Melanie Russell, Mary Vearncombe and Murray Urowitz, all based in Toronto, outline evidence-based strategies to improve immunization compliance of postgraduate medical trainees at large academic-medical facilities. The purpose of this evaluation is to assess the effectiveness of the modifications made by the University of Toronto Postgraduate Medical Education to improve medical trainee compliance with the immunization standards set forth in national guidelines, provincial regulations and protocols and university policy.

Our third scenario is by Alice B. Aiken, Marg Atkinson, Mark M. Harrison and John Hope, of Kingston, Ontario – “Reducing Hip and Knee Replacement Wait Times: An Expanded Role for Physiotherapists in Orthopedic Surgical Clinics.” This paper describes a research project that examined an expanded role for physiotherapists to provide pre- and post-operative consultation to patients with hip and knee complaints. The overall goal was to save the surgeon’s time and improve patient throughput, thereby reducing wait times.

In *Futurethink* we feature a commentary by Linda Silas, president of the Canadian Federation of Nurses Unions, that was originally published in *HealthcarePapers* (see: [www.longwoods.com/home.php?cat=467](http://www.longwoods.com/home.php?cat=467)). In it, she describes the need for healthy workplaces and more effective teamwork in healthcare. This commentary focuses on strategies for moving forward and getting real change in the workplace, changes that workers and patients will talk about. I also recommend Ken Tremblay’s interview with Linda, which appears on page 34.

Our feature article in *Longwoods Review* is “The Sustainability of Canada’s Healthcare System: A Framework for Advancing the Debate,” by Neil Stuart and Jim Adams, of IBM Consulting. In this paper, the authors argue that the debate of whether Canada’s healthcare system is sustainable is mired in ideology. The paper offers a framework that takes us beyond the ideological standoff, with a process to deal ethically with the sustainability of publicly funded healthcare. Our respondent is Steven Lewis in Saskatchewan who fiercely challenges the underpinnings of the paper by Stuart and Adams, thus providing an interesting debate. **HQ**



*Peggy Leatt*

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