

We are approaching a new year, and it is important that we evaluate not only what we have accomplished in the past but what we can modify and improve. This is ever-important in the healthcare industry as proper changes result in an increased quality of care for our patients and the opportunity to alter how we manage our healthcare units. As we move forward, we face local, national and global challenges in our evolving world. The articles in this issue of *Healthcare Quarterly* discuss new approaches to care access, novel responses to global health security and innovative policies to address healthcare organization.

Marcus J. Hollander, Jo Ann Miller, Margaret MacAdam, Neena Chappell and David Pedlar address new evidence arguing that it is possible to obtain better value for money in healthcare systems. In “Increasing Value for Money in the Canadian Healthcare System: New Findings and the Case for Integrated Care for Seniors,” the authors present integrated care delivery models for those with ongoing care needs.

“The Use of Coaching to Improve Peri-operative Efficiencies: The Ontario Experience,” by Heather Sherrard, Joann Trypuc and Alan Hudson, discusses Ontario’s Wait Times Strategy. Launched in November 2004, this strategy uses the concept of coaching, most typically associated with sports. The strategy works to improve access to services and reduce patient wait times.

This issue’s Health Law section is presented by Kumanan Wilson, Christopher McDougall and Alan Forster in “The Responsibility of Healthcare Institutions to Protect Global Health Security.” In our increasingly global society, public threats crossing borders present a challenge to global health security. This article discusses the International Health Regulations – a document that responds to this security challenge by outlining methods that countries can use to prepare for and respond to public health emergencies of international concern.

A security breach, however, is not always an attributable to a global concern, as is illustrated by Jacqueline Malonda, Janice Campbell, Daniela Crivianu-Gaita, Melvin H. Freedman, Polly Stevens and Ronald M. Laxer. Their article discusses a serious breach in privacy after a laptop computer with patients’ personal information was stolen from Toronto’s Hospital for Sick Children in 2007. The authors outline the hospital’s response and its continuous work to create improved awareness and acceptance of patients’ right to privacy for their healthcare records.

This issue’s Ideas at Work and Case Study sections both discuss methods for simplifying aspects of healthcare management while maintaining the quality of healthcare. “Adverse Events in Community Care: Implications for Practice, Policy and Research,” describes the results of a symposium on adverse events. Authors Paul Masotti, Michael Green and Mary Ann McColl present the results, which include prioritized lists of what providers can do to prevent adverse events, suggested policy changes and information needed from research. Likewise, Jessica Meleskie and Don Eby’s case study titled “Adaptation and Implementation of Standardized Order Sets in a Network of Multi-hospital Corporations in Rural Ontario” discusses standardized, pre-printed or computer-generated physician orders as a way to improve patient quality of care. The authors describe the orders’ implementation at the Grey Bruce Health Network.

In the process of making changes and improving our methods, we must also evaluate ways to continue positive changes. The Longwoods Review “Sustaining Change: Once Evidence-Based Practices Are Transferred, What Then?” by Tazim Virani, Louise Lemieux-Charles, David A. Davis and Whitney Berta, discusses challenges faced by practitioners and researchers to maintain appropriate changes and how the organizational memory framework can be used to prevent knowledge loss or decay.

In today’s global society, we must continue to strive to serve our patients as best we can and to make necessary adjustments to keep them safe.



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– Peggy Leatt, PhD