

A healthcare system is only as good as its leaders and the administrative processes it follows. With demand for quality healthcare continuing to rise and the need for efficient methods in hospitals and care centres, accompanied with the looming nursing shortage in our region, it becomes ever more important to analyze our current efforts to see what changes can be made for improvement. This issue of *Healthcare Quarterly* largely focuses on such analyses and results, reporting challenges experienced and successes obtained.

Sara Kreindler writes of the growing problem of chronic disease and the need to make changes in our health system as envisioned in the Chronic Care Model. In “Lifting the Burden of Chronic Disease: What Has Worked? What Hasn’t? What’s Next?” Kreindler discusses the documented pitfalls of trying to implement the Chronic Care Model wholly, as demonstrated through implementation research. She discusses the achievement of one highly needed change at a time as being more effective in making improvements in the care of chronically ill patients. This article attempts to fill decision-makers’ need to set priorities by comparing the strength of evidence for different interventions. It provides guidance on optimal system design for chronic disease management and prevention.

In “Who Cares and How Much?” Marcus J. Hollander, Guiping Liu and Neena L. Chappell discuss the economic contribution that unpaid middle-aged and older caregivers have on the healthcare system by providing care to the elderly. The authors note that the contribution of these caregivers is often hidden since information on the amount of time spent on such tasks is not readily available. The authors argue that aggregate estimates of the market costs to replace these unpaid caregivers are important for governments to consider when developing policy.

In this issue’s new Healthcare Ethics section, Don Flaming, Linda Barrett-Smith, Norma Brown and Judy Corcoran argue for an approach to ethics overview of quality improvement (QI) projects that is distinct from that used for research projects. They explain the opinion of the Alberta Research Ethics Community Consensus Initiative that all projects that generate knowledge can create risks to participants, and that these risks need to be identified, assessed and addressed. Any possibility of risk raises the question of ethical conduct, and the authors assert that ethical considerations may apply to QI projects even if the participants are not regarded as research subjects. With a case example to illustrate potential ethical issues, they propose six considerations and guidelines to help assess risk for participants of QI projects.

The two articles in our Ideas at Work section discuss leadership in healthcare systems. The first article, by Anne Marie MacLeod, Jeffrey Gollish, Deborah Kennedy, Rhona McGlasson and James Waddell, discusses the successes and challenges at the Toronto Central Local Health and Integration Network in implementing a Joint Health and Disease Management Program for overall system leadership. The first phase of this program, the Hip and Knee Replacement Program, focused on improving access and quality of care, coordinating services and measuring wait times for patients.

The second article, by Michael Heenan and David Higgins, focuses on efforts by St. Joseph’s Healthcare Hamilton to

create a patient safety and quality culture; these efforts were inspired by a white paper released by the Institute for Healthcare Improvement that addressed the importance of medical staff leadership. In “Engaging Physician Leaders in Performance Measurement and Quality,” the authors review the use of a medical quality scorecard developed to engage medical staff in achieving the goals of patient safety and quality.

This issue presents a Special Focus on Health Human Resources (HHR). The first article centres on a managed change process to introduce three new providers into six different emergency departments. MedEmerg facilitated this process in collaboration with the Ontario Ministry of Health and Long-Term Care. “The Application of Change Management Principles to Facilitate the Introduction of Nurse Practitioners and Physician Assistants into Six Ontario Emergency Departments” highlights key successes and challenges and provides some lessons learned. Authors James Ducharme, Jenny Buckley, Robert Alder and Cindy Pelletier emphasize the importance of a managed process that includes team development.

In the second article on HHR, Cheryl Anne Smith highlights the need for appropriate management. In her article “Nursing Workforce Planning: The Key to Success,” she discusses efforts by the Ottawa Hospital (TOH) to create a workforce plan to address the looming nursing shortage. TOH developed an interesting evidence-based workforce planning model that predicts the number of nurses needed to hire. This model has had a variance of less than 5% for each of the past four years!

“Form and Function of Joint Health and Safety Committees in Ontario Acute Care Hospitals,” by Kathryn Nichol, Irena Kudla, Michael Manno, Lisa McCaskell, Joseline Sikorski and D. Linn Holness, discusses the lack of research done on joint health and safety committees (JHSCs) in Ontario’s healthcare sector. This study attempts to understand the role, resources, structure and functioning of JHSCs. Its findings warrant further research as the study points out some great strengths of such efforts but some significant gaps.

Nancy Baxter and Linda Rabeneck present new findings on the risks and limitations of colonoscopy in early detection of colorectal cancer. They discuss that while the procedure does have established benefits for detecting and preventing cancer, it also has some limitations, including the fact that certain people seem to be at an increased risk for serious procedure-related complications.

Finally, the Health Quality Council of Alberta’s chief executive officer spent time with one of our own. Ken Tremblay shares his conversation with John Cowell in which they discuss quality councils’ roles in assessing performance and policies that ensure safety, quality, sustainability and access to timely care – all elements for which we hold high standards!

*Peggy Leatt*

– Peggy Leatt, PhD

