

This issue of *Healthcare Quarterly* tackles the challenge of improving care for multimorbid patients. Few health systems across Canada (or elsewhere) are designed to provide integrated, coordinated and high quality care for the complex patients who need it. Indeed, as Nick Goodwin points out in his interview with guest editor Renee Lyons in this issue, the reverse is more often true: the people who would most benefit from such coordinated care – the socially disadvantaged, children, adults with multiple chronic conditions and others – are the least likely to get it (Lyons 2016).

The social, epidemiological and health systems factors creating this conundrum have been recognized for some time. But the health system is like a large cargo ship: fully loaded, it takes a long time to turn, even when those in charge know where they need to be headed. And, unlike that cargo ship, in healthcare there are still arguments about what the new directions should be to create high quality care for multimorbid patients. However, as the articles in this issue illustrate, there is growing agreement on the improvements needed in the roles of those providing care. New and enhanced relationships must be developed between clinicians, others with information and resources, and clients. More flexible and effective coordination is required to weave together a custom array of services necessary for complex patients with varying health and social needs. And, just as critical, the system needs to abandon the enduring silos of care that are reinforced by the governance, regulatory and financial structures that limit the flexibility needed to

create a responsive, effective and efficient health system.

The acerbic American social critic H.L. Mencken (1917) observed that “there is a well-known solution for every human problem – neat, plausible ... and wrong.” None of the essays in this edition falls into that trap. Indeed, there is a clear-eyed recognition of the complexity of these issues and the need to share lessons among the clinicians, researchers, decision-makers, patients, care givers and others addressing these problems.

As guest editor, Renee Lyons has created a rich menu of articles from leading thinkers, who address the challenges of designing care for complex patients and developing the health and community resources that will support that care. Renee’s leadership in this area, both as a thoughtful academic and as an engaged practitioner, is once again demonstrated by her success in assembling this valuable collection. These articles demonstrate that progress is being made in reshaping the mental models and system linkages necessary to answer the challenges of multimorbidity in Canada and elsewhere.

– G. Ross Baker  
Editor-In-Chief

### References

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