

SUGGESTED READING

. . . To enhance your conference experience May 12-15, 2014.

CAHSPR Conference 2014 “Convergence of Health Policy and Evidence – Bridge Over Troubled Water”

Healthcare Quarterly, 15(Special Issue) December 2012: [The Journey toward High Performance and Excellent Quality](#) ... Achieving and sustaining high performance in healthcare will require dedicated effort by everyone in every healthcare organization. ... *by Adalsteinn Brown, G. Ross Baker, Tom Closson and Terrence Sullivan*

Healthcare Policy, 9(2) November 2013: [Fee Increases and Target Income Hypothesis: Data from Quebec on Physicians’ Compensation and Service Volumes](#) ... While total physician compensation costs, average physician compensation and average unit cost per service all rose extremely fast, the total number of services and average number of services per physician either stagnated or decline... *by Damien Contandriopoulos and Mélanie Perroux*

Healthcare Policy, 9(2) November 2013: [Economic Evaluation of Manitoba Health Lines in the Management of Congestive Heart Failure](#) ... As healthcare costs have increased dramatically in recent years, cost containment has become increasingly important to healthcare planners and decision-makers. Interest in the potential cost savings of telehealth has correspondingly grown... *by Yang Cui, Malcolm Doupe, Alan Katz, Paul Nyhof and Evelyn L. Forget*

Healthcare Policy, 9(1) August 2013: [Reforming Canadian Primary Care – Don't Stop Half-Way](#) ... Perhaps what is truly miraculous is that in an inherently unequal capitalist society, ... a program that rests on the fundamental principle that access to care should be determined solely by medical need... *by Brian Hutchison*

Healthcare Policy, 7(2) October 2011: [Where Are Ontario’s Respiratory Therapists Working?](#) ... Many healthcare professional disciplines are faced with managing an increased demand for services coupled with perceived shortages of professionals in the workforce... *by Brenda Gamble, Frieda Daniels, Raisa Deber, Audrey Laporte and Winston Isaac*

Healthcare Policy, 8(3) February 2013: [Evaluation of Physician Return-for-Service Agreements in Newfoundland and Labrador](#) ... (RFS) programs are a commonly used strategy to attract physicians to practice in rural or underserved communities with the long-term goal of improving physician retention in these communities ... *by Maria Mathews, Sara Lynn Heath, Shelley May Neufeld and Asoka Samarasena*

Healthcare Policy, 9(Special Issue) October 2013: [Beyond ‘Run, Knit and Relax’: Can Health Promotion in Canada Advance the Social Determinants of Health Agenda?...](#) although the reinvention in question is not impossible, it is implausible. Against that background, it is worthwhile to rethink the future of the health promotion enterprise as a whole. ... *by Ted Schrecker*

Healthcare Policy, 6(4) May 2011: [Purchasing Prescription Drugs in Canada: Hang Together or Hang Separately](#) ... We propose they start by purchasing selected generic drugs for the entire population and provide them for little or no cost to patients. This politically popular strategy would significantly reduce drug expenditures and improve population health. ... *by Michael R. Law and Steven G. Morgan*

HealthcarePapers, 11(1) April 2011: [Why the Elderly Could Bankrupt Canada and How Demographic Imperatives Will Force the Redesign of Acute Care Service Delivery](#) ... it is predicted that Canada will be one of the worst-affected nations, as the IMF already considers our proportion of costs related to aging to be among the highest in the world. ... *by Samir K. Sinha*

Healthcare Quarterly, 16(1) January 2013: [Social Media in Healthcare: It's So Five Years Ago?](#) ... hospitals and healthcare providers remain reticent to embrace social media to improve the main focus of the healthcare sector – patient communication and care. ... *by Neil Seeman and Karen Born*

Healthcare Quarterly, 15(Special Issue) December 2012: [Supporting the Use of Research Evidence in the Canadian Health Sector](#) ... the MOHLTC has provided clear signals that it is prioritizing the use of research evidence to inform the development of policy by requiring training for civil servants in finding and using research evidence, ... *by Michael Wilson, John Lavis and Jeremy Grimshaw*

Healthcare Policy, 9(1) August 2013: [Cost-Control Mechanisms in Canadian Private Drug Plans](#) ... In 2010, 23 insurance companies offered private benefits plans that provided health coverage to 68% of Canadians... *by Jillian Kratzer, Kimberlyn McGrail, Erin Strumpf and Michael R. Law*

Healthcare Policy, 5(3) March 2010: [Wait Time Management Strategies for Scheduled Care: What Makes Them Succeed?](#) ... It seems clear, then, that we must pay closer attention to the factors that facilitate or impede the implementation of WTMS in HCO... *by Marie-Pascale Pomey, Pierre-Gerlier Forest, Claudia Sanmartin, Carolyn De Coster and Madeleine Drew*

Healthcare Policy, 8(2) December 2012: [Making Evidence on Health Policy Issues Accessible to the Media](#) ... Academics research important health policy issues, and journalists communicate with the public about these issues. Unfortunately, there is often a gap between what the media report and what researchers have found... *by Noralou P. Roos, Kathleen O'Grady, Sharon Manson Singer, Shannon Turczak and Camilla Tapp*



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