



“Innovations for Health System Improvement: Balancing Costs, Quality and Equity”

The 9th Annual CAHSPR Conference

May 29–31 2012

Hilton Montreal Bonaventure Hotel (Montreal, Quebec)

Conference Program

www.cahspr.ca

 **CAHSPR**
ACRSPS

Canadian Association for
Health Services and Policy Research
l'Association canadienne pour la recherche
sur les services les politiques de la **santé**

**better research,
better decisions,
 better health.**

CAHSRPR wishes to thank the conference sponsors for their generous support.

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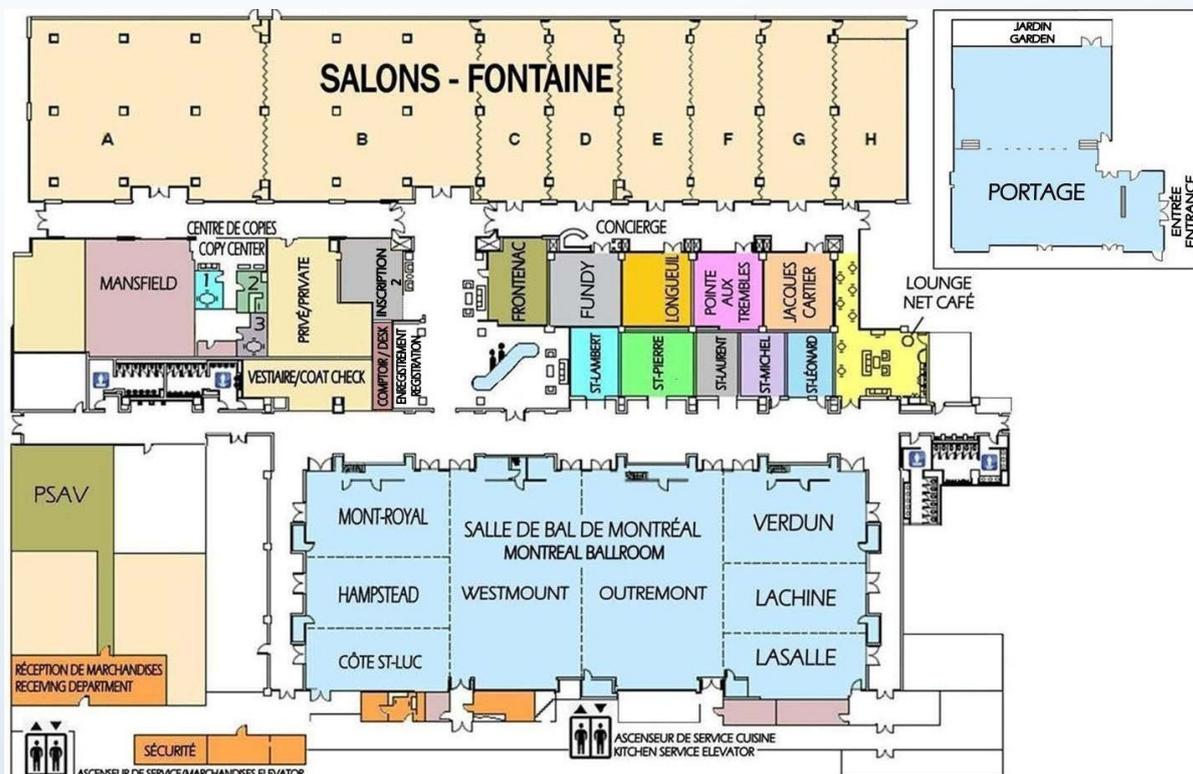
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Floor Plan



Letter from the Conference Co-Chairs

Welcome to Montreal and to CAHSPR's 2012 conference devoted to Innovations for Health System Improvement: Balancing Costs, Quality and Equity. Canada's healthcare systems face significant common challenges. Despite being well resourced, our healthcare systems have substantial shortcomings whether in the field of optimal chronic condition management, mental health or the development of high-performance primary care. These systems require innovative solutions and research provides a fertile ground to drive innovation. The 2012 conference seeks to harness health services and policy research outputs to investigate potential ways to improve our healthcare systems. We must look into the aspects of innovative research that could support an improved healthcare system. In fact, cutting-edge research is needed to lay the foundations of tomorrow's healthcare system. With Canada's current Health Accord set to expire in 2014 as well as potential changes to the funding formula, it is important to strike a more appropriate balance between cost controls, achieving high standards of quality and safety, and equal access to care and use of services.



CAHSPR's 2012 annual conference will bring together a record number of participants. This year's program has the support of a significant number of sponsors. The 2012 conference is made possible through the support of CAHSPR's management team, its organizing committee and those in charge of the scientific program.

We wish you a successful conference and hope the debates and discussions will meet your expectations. Welcome to Montreal!

Jean-Louis Denis (Conference Co-Chair)
Professor, ENAP, École nationale
d'administration publique

Denis Roy (Conference Co-Chair)
Vice-president, Scientific Affairs at the
Institut national de santé publique
du Québec

CAHSPR is Growing! Get Involved!

Welcome to the CAHSPR conference, our annual showcase event. Even before it began, CAHSPR's 2012 conference was breaking records: abstracts, presentations, registrations, sponsors, student delegates, and new memberships are all higher than ever before. But I am writing to share even more exciting news. Starting in 2012, CAHSPR will become much more than just a conference!

While we will continue to host Canada's premier conference on health services and policy research, an extensive consultation and planning process has led the Board of Directors to decide that CAHSPR can and should do more to support our community.

CAHSPR is the "big tent" under which many individuals and organizations come to advance the cause of evidence-informed health system decision-making. The overarching theme of these collaborations is well summarized in our conference tag line: better research, better decisions, better health. In keeping with that theme, while also expanding in new directions, CAHSPR will engage in four areas of strategic activity starting in 2012:

- **Community-building:** CAHSPR will do more to foster connections and collaboration among individuals and organizations involved in the production and use of research.
- **Promoting appreciation:** CAHSPR will launch new initiatives, including a new website, to better promote awareness and appreciation of evidence-informed health system decision-making.
- **Supporting capacity:** CAHSPR will collaborate with universities and training programs to support capacity and professional development related to research production and use.
- **Knowledge exchange:** CAHSPR will continue to host a national conference on health services and policy while creating new mechanisms for linkage and exchange across Canada.

We are delighted to be expanding our work in each of these four areas. To ensure effective implementation of value-adding activities, CAHSPR will now be directed by a professional Executive Director who will work closely with our President, Board, and an Association Advisory Committee made up of stakeholders and constituency representatives.

CAHSPR is a vehicle for collective action toward evidence-informed health system decision-making. Realizing its potential requires engagement and commitment of individuals and organizations who share that goal. **So please join us at our Annual General Meeting (on Wednesday at 7:30am in the Montreal ballroom) to learn more about CAHSPR's new directions and how you can get involved.**

Hope to see you there!

Steve Morgan
President, Canadian Association for Health Services and Policy Research



General Acknowledgements

Thank you to the Conference Planning Committee for their continued commitment and support:

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CAHSPR welcomes our exhibitors:

Canadian Health Human Resources Network (CHHRN)
Canadian Health Services Research Foundation (CHSRF)
Canadian Institute for Health Information (CIHI)
Canadian Institutes for Health Research / Institute of Health Services and Policy Research (CIHR/IHSPR)
Health Council of Canada (HCC)
Health Systems Performance Research Network (HSPRN)
Institute for Clinical Evaluative Sciences (ICES)
Institut national de santé publique Québec (INSPQ)
Institut national d'excellence en santé et en services sociaux (INESSS)
Nova Scotia Health Research Foundation (NSHRF)
Observatoire québécois des réseaux locaux de services (OQRLS)
Quebec Population Health Research Network (QPHRN)
Réseau de recherche en santé des populations du Québec (RRSPQ)

Funding and Accreditation

Maintenance of Certification: Attendance at this program entitles certified Canadian College of Health Leaders members (CHE / Fellow) to 1.75 Category II credits for May 28, 2012 Pre-Conference and 9.25 Category II credits for CAHSPR Conference toward their maintenance of certification requirement.

The organization of this year's sub-plenary program and the production of highlight videos for post-conference dissemination have been funded in part by the Canadian Institutes of Health Research (CIHR) through a Meetings, Planning and Dissemination Grant.

“ This program meets the accreditation criteria of the Québec College of Family Physicians, a continuous professional development accrediting organization recognized by the Collège des médecins du Québec, and has been approved for up to 10 Mainpro-M1 credits (recognized as Catégorie 1 for non-CFPC members).

Conference at a Glance

Monday, May 28, 2012

Pre-Conference Activities

1:00pm - 4:30pm	CIHR Grant Writing 101 <small>*This session sponsored by the Canadian Institutes for Health Research / Institute of Health Services and Policy Research (CIHR/IHSPR)</small>	Fontaine E
3:30pm - 5:00pm	Primary Healthcare Theme Group Business Meeting	Fontaine F
4:00pm - 5:30pm	Mental Health Theme Group Business Meeting	Pointe aux Trembles
5:00pm - 6:00pm	CAHSPR Student Working Group Pre-Conference Primer	Fontaine H
6:00pm - 8:00pm	CHSRF / CIHR-IHSPR Opening Reception: Celebrating Health Services and Policy Research Innovation <small>* This session sponsored by the Canadian Institutes for Health Research / Institute of Health Services and Policy Research (CIHR/IHSPR) and the Canadian Health Services Research Foundation (CHSRF)</small>	Portage, Lobby Level

Tuesday, May 29, 2012

Conference Day 1 (Policy Focus)

7:30am - 9:00am	Networking Breakfast	Montreal Ballroom
9:00am - 9:15am	Welcome Remarks	Montreal Ballroom
9:15am - 10:15am	Keynote Speaker Address	Montreal Ballroom
10:15am - 10:30am	Coffee Break and Transition	Fontaine AB
10:30am - 11:45am	Concurrent Sessions – Stream A	See Page 10
11:45am - 1:15pm	Lunch & Keynote Speaker Address	Montreal Ballroom
1:15pm - 2:45pm	Sub-Plenary Session 1	See Pages 21-22
2:45pm - 3:00pm	Coffee Break and Transition	Fontaine AB
3:00pm - 4:15pm	Concurrent Sessions – Stream B	See Page 11
4:15pm - 4:30pm	Coffee Break and Transition	Fontaine AB
4:30pm - 6:00pm	Keynote Speaker Address	Montreal Ballroom
6:00pm - 7:15pm	CAHSPR Poster Viewing Reception	Fontaine AB

Conference at a Glance

Wednesday, May 30, 2012 Conference Day 2

7:30am - 9:00am	Networking Breakfast & Annual General Meetings	Montreal Ballroom
9:00am - 9:15am	Welcome Remarks	Montreal Ballroom
9:15am - 10:15am	Emmett Hall Lecture	Montreal Ballroom
10:15am - 10:30am	Coffee Break and Transition	Fontaine AB
10:30am - 12:00pm	Sub-Plenary Sessions 2	See pages 23-24
12:00pm - 1:15pm	Networking Lunch and Awards Presentations <small>*This session sponsored by The Canadian Institute for Health Information (CIHI)</small>	Montreal Ballroom
1:15pm - 2:30pm	Concurrent Sessions – Stream C	See page 12
2:30pm - 2:45pm	Coffee Break and Transition	Fontaine AB
2:45pm - 4:00pm	Concurrent Sessions – Stream D	See page 13
4:00pm - 4:15pm	Coffee Break and Transition	Fontaine AB
4:15pm - 5:45pm	Sub-Plenary Session 3	See pages 25-26
5:45pm - 7:30pm	CAHSPR Poster Viewing Reception	Fontaine AB

Thursday, May 31, 2012 Conference Day 3

7:30am - 9:00am	Networking Breakfast	Montreal Ballroom
9:00am - 10:15am	Concurrent Sessions – Stream E	See page 14
10:15am - 10:30am	Coffee Break and Transition	Fontaine AB
10:30am - 11:45am	Concurrent Sessions – Stream F	See page 15
11:45am - 12:45pm	Poster Viewing Lunch	Fontaine AB
12:45pm - 2:00pm	Concurrent Sessions – Stream G	See page 16
2:00pm - 3:15pm	Keynote Speaker Address	Montreal Ballroom
3:15pm - 3:30pm	Poster Awards and Closing Remarks	Montreal Ballroom

Sub-Plenary Sessions at Glance

Tuesday, May 29, 2012

1:15PM-2:45PM

Sub-Plenary Session 1

Human Resources for Primary Health Care: Moving from Pilots to Real Reform	Mont Royal
Creating High Performing Health Care Organizations	Montreal Ballroom
Can we Balance the 'Cost-Quality-Equity Equation' in Cancer Control?	Portage, Lobby Level

Wednesday, May 30, 2012

10:30AM-12:00PM

Sub-Plenary Session 2

Financial Incentives and Health System Performance	Montreal Ballroom
Integration of Mental Health Services in Primary Health Care	Portage, Lobby Level
Dialogue on Capacity Building in Health Services and Policy Research: Past, Present and Future	Mont Royal

Wednesday, May 30, 2012

4:15PM to 5:45PM

Sub-Plenary Session 3

How to Leverage Nursing Care for Health System Improvement and Transformation	Portage, Lobby Level
Drug Insurance in Quebec: Model or Foil?	Mont Royal
Complex Interventions in Health Services and Policy Research	Montreal Ballroom

Concurrent Session Stream A
Tuesday, May 29, 2012 (10:30am to 11:45am)
**for full abstract details, see the Book of Abstracts (pages 6 to 14)*

A1 : Platinum Sponsored Panel: Canadian Institute for Health Information (CIHI) Portage			
International Comparisons: Adding Value to the Canadian Health Care System			
A2: Platinum Sponsored Panel: Canadian Health Services Research Foundation (CHSRF) Fontaine C			
Connecting the Dots: Options to Accelerate Health System Transformations Across Canada			
A3: Health System Change Fontaine D			
A3.1 Au CHUM, des médecins-chefs démontrent leur intérêt de développement en leadership médical et en gestion	A3.2 The Road to Good Intentions is Often Full of Potholes. Experiences of Healthcare System Change in London, UK	A3.3 Developing and Evaluating a Leadership Intervention for Guideline Utilization in Nursing: a Pilot Cluster Randomized Control Trial	A3.4 Theory-Driven Instrument Development to Assess the Impact of Continuing Professional Development (CPD) Activities on Clinical Practice
A4: Performance Measurement Mont Royal			
A4.1 Updating Pan-Canadian Primary Health Care Indicators - What We've Learned	A4.2 Le système de santé québécois : bilan de trois années de comparaisons internationales	A4.3 Alberta Heart Failure Key Performance Indicators: Towards Dashboard Monitoring	A4.4 Evaluating a New Model of Care and Reimbursement in Home Care: the Ontario Integrated Client Care Project (ICCP)
A5: Public Health Policy Fontaine E			
A5.1 Evidence-Informed Policy in Ontario: The Case of Newborn Screening for Sickle Cell Disorders	A5.2 A Pilot Study of a Telephone-Supported Self-Care Intervention for Depression Among Older Adults with a Chronic Physical Illness in Primary Care	A5.3 Blazing the Trail for Including Youth in Marijuana Health Policy Discourse	A5.4 Involving Stakeholders in a Deliberative Process for Screening Policy-Making: Early diagnosis and Newborn Screening of Cystic Fibrosis in Quebec
A6: Pharmaceutical Policy Fontaine F			
A6.1 Authorship Policies & Ghostwriting in Medical Journals: A Political Economy Perspective	A6.2 Changing Scientific and Policy Paradigms in the Pharmaceutical Sector	A6.3 Combined Oral Contraceptives and Venous Thromboembolic Risks: A Regulatory Conundrum	A6.4 Framing Pharmacare: An Analysis of Canadian Print Media Coverage 1990-2010
A7: Health Human Resources Planning Fontaine G			
A7.1 Service-Based Health Human Resources Planning for Aging Canadians	A7.2 Competency-Based Health Human Resources Planning: Consideration of Regulatory and Legal Frameworks	A7.3 Influence des ressources disponibles sur le raisonnement Clinique du professionnel de la santé: quelles evidences scientifiques?	A7.4 Saskatchewan's Health Human Resources Plan
A8: Policy for Equity and Healthcare Fontaine H			
A8.1 The Healthcare Reform in Quebec: Has Equity Improved in the Provision of Primary Healthcare (PHC) Among Socioeconomic Groups Between 2005 and 2010?	A8.2 Wide Reflective Equilibrium for Policy - Adapting a Method of Moral Justification to the Context of Health Policy Ethics	A8.3 Gendering Private Health Insurance: Balancing Costs, Quality and Equity?	A8.4 Declining Access to Induced Abortions in Rural Settings: Findings of the British Columbia Abortion Provider Survey

Concurrent Session Stream B
Tuesday, May 29, 2012 (3:00pm to 4:15pm)
**for full abstract details, see the Book of Abstracts (pages 15 to 22)*

B1: Panel Fontaine C			
Public Health Systems and Services Research - The 'New Kid on the Block'			
B2: Policies Related to Drug Expenses Fontaine D			
B2.1 Saving Public Money at Private Expense? Impact of Ontario's Generic Drug Pricing Reform on Out-of-Pocket Drug Expenditure	B2.2 Reducing Provincial Prescription Drug Program Costs Through the New West Partnership	B2.3 The Potential Savings from Following International Generic Drug Prices in Ontario	B2.4 Pharmaceutical Pricing After Early Benefit Assessments
B3: Redesign in Chronic Disease Management Fontaine E			
B3.1 Designation, Diligence and Drift: Understanding Laboratory Expenditure Increases in British Columbia, 1996/97 to 2005/06	B3.2 The Impact of Integrated Primary Care Delivery on Health Care Costs: Quebec's Family Medicine Groups	B3.3 Phoning in the Research- The Untested Assumption that Health Help Lines Decrease Use of Emergency Departments	B3.4 Return on Investment for Primary Care Reform in Ontario
B4: Health Care Utilization and Access Fontaine F			
B4.1 Health Care Utilization Trajectories Revisited: Implications for Insurance Markets	B4.2 The Impact of Family Structure on Nursing Home Use	B4.3 Patient Determinants of Actual Referral Choice for Joint Replacement Surgery	B4.4 How Many ICU Beds Does a Population Need?
B5: Health Policy at System Level Mont Royal			
B5.1 Intersectoral Collaboration for Public Policy toward Health Equity	B5.2 Anatomy of Quebec's Decision-Making Process: The Privatization of the Quebec Healthcare System		B5.3 Towards Optimal Evidence Briefs for Policy: How Context and Issues Influence the Usefulness of Policy-Relevant Research Syntheses
B6: Patient Involvement and Knowledge Transfer Fontaine G			
B6.1 Direct to Patient Knowledge Translation: Can Access to Treatment Guidelines Increase Provider-Patient Communication?	B6.2 The Face of Complex Chronic Disease - Using Patient Experience to Inform Policy and Practice	B6.3 Valuing Quality: Results from a Patient-Focused Funding Forum	B6.4 Clinicians Perspectives on Patient-Satisfaction in Adult Congenital Heart Disease Clinics - A Dimension of Healthcare Quality Whose Time has Come
B7: Health Care Expenditures and Funding Fontaine H			
B7.1 Health Care Cost Drivers in Canada During the Last Decade	B7.2 Physician Compensation Costs in Canada: More for Less?	B7.3 Préférences des médecins de première ligne relativement aux incitations à l'offre de prévention: un éclairage français	B7.4 Case-Mix and Quality-Based Funding for Long-Term Care: Can interRAI Data Help?

Concurrent Session Stream C
Wednesday, May 30, 2012 (1:15pm – 2:30pm)
**for full abstract details, see the Book of Abstracts (pages 23 to 29)*

C1: Panel of Knowledge Transfer Case Studies Fontaine C			
C1.1 MCHP - Herding Data Cats; From Custodian to Researcher to Publication	C1.2 Saskatchewan's Primary Healthcare (PHCI) and Surgical Initiatives (SI): Embedded Researchers to Support Health System Transformation	C1.3 Evidence-Based Health Reporting: Checking the Latest Headlines Against Research Evidence and Holding Leaders to Account for Science-ish Statements	
C2: Panel Fontaine D			
Making Sense of Electronic Medical Record Adoption as Complex Interventions in Primary Health Care			
C3: Access and Service Utilization Fontaine E			
C3.1 Exploring Paramedics' Perceptions of Ambulance Use (and Misuse) in Ontario	C3.2 Defining the Visit-based Profile of Frequent Emergency Department Users: Identifying Missed Opportunities for Care	C3.3 Factors Associated with Acute Care use During the Wait for Long-Term Care Placement Among Community- Dwelling Older Adults in Ontario	
C4: Pharmaceutical Policies and Regulatory Issues Fontaine F			
C4.1 The Impact of Patent Expiries on Future Drug Spending in Canada	C4.2 Negotiated Contracts for Funding Pharmaceuticals: A National Survey of Canadian Public Drug Payers	C4.3 The Design and Coverage of Private Drug Plans	C4.4 Patients' Groups and Funding from the Pharmaceutical Industry: Policy Implications for Costs, Quality and Equity in Prescription Drugs
C5: Measurement of Healthcare Performance and Patient Safety Fontaine G			
C5.1 Trends, Geographic Variations and Health Disparities in Rates of Potentially Avoidable Mortality and Mortality from Treatable Causes in Canada	C5.2 Measuring Patient Safety Culture Change	C5.3 Development of an In-Hospital Standardized Mortality Ratio for Emergency Department Sensitive Conditions	C5.4 Le système de santé québécois : bilan de trois années de comparaisons internationales
C6: Models of Care Spending Mont Royal			
C6.1 The Concentration of Health Care Spending: Little Ado (yet) About Much (money)	C6.2 Rising Income and the Increased Share of Health Spending in Canada	C6.3 Physician Spending on the Rise: Where Is the Money Going?	
C7: Access to Care and Equity Fontaine H			
C7.1 Variations in Effective, Preference-Sensitive and Supply-Sensitive Care in British Columbia	C7.2 Supporting Delivery to Reduce Risk: The Role of Community-Based Organizations Delivering HIV/AIDS Specific PHC Services in Select OECD Countries	C7.3 Long-Term Trends in Canadian Household Spending on Health Care	C7.4 Access and Equity: Examining the Provision of Home and Community Care for Lesbian, Gay, Bisexual and Transgender (LGBT) Seniors

Concurrent Session Stream D
Wednesday, May 30, 2012 (2:45pm – 4:00pm)
**for full abstract details, see the Book of Abstracts (pages 30 to 37)*

D1: Evidence Informed Health Care Studies Fontaine D				
D1.1 A Qualitative Research Approach to Evidence Informed Decision Making in Mental Health and Addictions Services	D1.2 Innovations in Opioid Replacement Treatment	D1.3 Mental Health Policy in Action - Enablers of Knowledge Flows in the Quebec Ministry of Health and Social Services		
D2: Panel Fontaine C				
Workshop on Writing Opinion Editorials				
D3: Cancer Care Management Fontaine E				
D3.1 Population-Based Longitudinal Study of Follow-Up Care for Colorectal Cancer Patients in Nova Scotia	D3.2 Breast and Colorectal Cancer Survivors' Experiences with and Perspectives on Their Routine Follow-up Care	D3.3 Toward a Population-Based Approach in End-of-life Care Surveillance	D3.4 The Value of Personalizing Medicine: Medical Oncologists' and Patients' Perspectives on Genomic Testing of Breast Tumours in Chemotherapy Decisions	
D4: Equity and Chronic Disease Management Portage				
D4.1 Natural History and Outcomes of Hypertension Among Canadian Population	D4.2 Adherence to Pulmonary Rehabilitation: a Qualitative Study	D4.3 Towards Measuring the Balance: Equity Oriented PHC Indicators	D4.4 The Challenge of Defining an Adequate Gold Standard for Validating Dyslipidemia From Electronic Medical Records (EMR): The Canadian Forces Health Services Approach	
D5: Priority Setting Mont Royal				
D5.1 Priority Setting in Ontario's LHINs: Ethics and Economics in Action	D5.2 The Development of a Disinvestment Framework to Guide Resource Allocation Practices in Health Service Delivery Organizations		D5.3 Forecasting Health Expenditures: Methods and Applications to International Databases	
D6: Quality and Safety in Homecare and Community Care Fontaine F				
D6.2 Outcomes of Acute Care Geriatric Units in the Context of Intervention Delivery, and Health Care Team Development Strategies	D6.1 Facility Ownership and Organizational Characteristics Associated with Nursing Home to Emergency Department (ED) Resident Transfers in One Large Health	D6.3 Safety and Medication Management in Home Care: Preliminary Findings	D6.4 Innovative Practices for Client-Centred Care in the Home and Community Sector	
D7: Health Human Resources and Work Environment Fontaine G				
D7.1 Professional Resocialization of the Internationally Educated Health Care Professionals in Canada: Identifying Existing Problems and Potential Solution	D7.2 The Influence of Work Characteristics on Health and Quality of Life in Working Women	D7.3 Workload Patterns of Canadian Family Physicians - Results from the National Physician Survey (NPS)	D7.4 Promoting Healthy Employees: The MUHC Wellness Challenge Program	D7.5 Partnership in Generating Evidence: Evolution of an Innovative Nursing Employment Policy
D8: Sponsored Panel- Canadian Institutes for Health Research / Institute of Health Services and Policy Research (CIHR/IHSPR) Fontaine H				
Innovators of 2011/12: Breaking Ground in Health Services and Policy Research				

Concurrent Session Stream E
Thursday, May 31, 2012 (9:00am – 10:15am)
**for full abstract details, see the Book of Abstracts (pages 38 to 44)*

E1: Panel Mont Royal			
Human Resource Capacity and Employment Opportunities in Health Services and Policy Research: Are We Moving Toward Equilibrium?			
E2: Access to Care for Immigrants and Aboriginal People Fontaine C			
E2.1 The Canadian Immigrant Population Aged 50+ and the Propensity for Integrated Care: An Examination of Equitable Access to Medical, Complementary, and Preventive Health Care Services	E2.2 Predictors of Low Cervical Cancer Screening Among Immigrant Women in Ontario, Canada	E2.3 Understanding and Improving Aboriginal Maternal and Child Health in Canada	E2.4 Identifying Unmet Mental Health Needs in Immigrant and Refugee Communities in the Central West LHN
E3: Economic Analysis Fontaine D			
E3.1 An Economic Comparison of Linezolid and Vancomycin for the Treatment of MRSA Related cSSSI: A Quebec Healthcare System Perspective	E3.2 New Policy Tools in Discrete Choice Preference Measurement: An Application to Drug Treatments for Juvenile Idiopathic Arthritis	E3.3 The Economic Impact Associated with Antidepressant use in Depression and Anxiety in Community Living Older Adults	E3.4 Exploring the Influence of Prior Caregiving Activities on Canadians' Labour Market Behaviour
E4: Human Resource Management and Physician Supply Fontaine E			
E4.1 Exploring and Advancing the Concept of Partnership Within the Nurse and Physician Relationship	E4.2 Evaluation of the Physician Return-for-Service Program in Newfoundland and Labrador	E4.3 An Enhanced Approach to Measure Physician FTE Counts	E4.4 When More Does not Help: A Study of Psychiatrist Supply and Access to Psychiatric Services in a Universal Health Coverage Setting
E5: Improving Chronic Care Management in Primary Care Fontaine F			
E5.1 Systematic Review of Effectiveness of Quality Improvement Interventions to Improve Care for Patients with Diabetes: One Size Does Not Fit All	E5.2 Toward Optimal Asthma Management: From Barriers to Solutions	E5.3 Evidence Synthesis for BETTER (Building on Existing Tools to Improve Chronic Disease Prevention and Screening in Family Practice) Project	E5.4 Developing Quality Indicators for Managing Chronic Illnesses in Primary Care: What we can Learn From Other Countries About Success Factors for Their Implementation and Use
E6: Cancer Care and Cost Fontaine G			
E6.1 Social Media and Cancer Drug Funding: Implications for Research and Policy	E6.2 Long-Term Direct Health Care Costs Attributable to Hepatocellular Carcinoma; a Population-Based Study	E6.3 Modeling the Cost-Effectiveness of Prostate Cancer Screening in British Columbia	
E7: Equity in Mental Health Fontaine H			
E7.1 First-Generation Immigrants and Hospital Admission Rates for Psychosis and Affective Disorders: An Ecological Study in Ontario, Canada		E7.2 Predictors of Postpartum Depression Among Immigrant Women in the First Year After Childbirth: Findings from The Ontario Mother and Infant Study III	

Concurrent Session Stream F
Thursday, May 31, 2012 (10:30am – 11:45am)
**for full abstract details, see the Book of Abstracts (pages 45 to 52)*

F1: Panel Mont Royal				
Challenges and Innovations for the Economic Evaluation of Public Health Interventions				
F2: Evaluation and Integration of Care Fontaine C				
F2.1 Service Blueprinting: A Novel Formative Evaluation Method for Care of Heart Attacks	F2.2 Development of a Measure of Network Integration: Its Application Evaluates the Success of Mandated Local Health Networks in Quebec	F2.3 Pragmatic Randomized Trials Combined with Qualitative Methods in Evaluations of Complex Systems	F2.4 Simulation of Lung Cancer Control Programs in Canada	
F3: Professional Involvement in Chronic Disease Management Fontaine D				
F3.1 Practice Patterns of Nurse Practitioners in Canadian Long-term Care Residential Settings: Results of a National Mixed Methods Study	F3.2 Comparison of Primary Care Models in the Prevention of Cardiovascular Disease - A Cross Sectional Study	F3.3 Describing Nursing Contribution to Chronic Disease Management in Primary Care Practices in Ontario	F3.4 A New Interprofessional Model of Care Improves Access to Care for Patients with Hip or Knee Osteoarthritis	
F4: Mental Health Policy Fontaine E				
F4.1 Addressing Barriers to Increased Emergency Department (ED) Diversion and Shorter Wait Times for People Experiencing a Mental Health Crisis	F4.2 The Times They Are A-Changin': The Compatibility of Universal Health Care and Mental Illness in Australia and Canada		F4.3 Elder Self-Neglect and Health Care Utilization: Findings from the Chicago Health and Aging Project	
F5: Continuity and Equity in Primary Care Fontaine F				
F5.1 Effect of Family Medicine Groups on Continuity of Care Measured With Year-to-Year Follow-up by Known Providers Using Administrative Databases	F5.2 Can Equity be Achieved in Multi-Site Recruitment? Recruitment Strategies Used Across Geographically Distributed PHC Settings	F5.3 Measuring EMR Adoption Amongst Family Physicians in Ontario. Does This Get Better Over Time?	F5.4 Gender Similarities and Differences in Primary Health Care Use and Need in Ontario Women and Men	F5.5 Development of a Population Health Policy Framework for Primary Care Networks in Alberta
F6: Physicians in Primary Care Delivery Fontaine G				
F6.1 Paying for Primary Care: The Impact of Ontario's New Remuneration Schemes on Physician Behaviour	F6.2 The Mediating Role of Emotional States between Psychosocial Correlates of Doctor-Patient Interaction and Treatment Adherence in Type 2 Diabetes	F6.3 The Impact of Panel Size on Quality of Care	F6.4 Practice Profiles of GPs in Montreal: Are They Distributed Equitably?	
F7: Collaboration Between Primary Care Organizations and Hospitals Fontaine H				
F7.1 The BETTER (Building on Existing Tools to Improve Chronic Disease Prevention and Screening in Family Practice) Project	F7.2 Patterns of Ambulatory Care Service Delivery to Chronic Disease Patients	F7.3 Does a Mandated Creation of Local Health Networks Leads to Increased Horizontal and Vertical Collaborations?	F7.4 Adapting to the Life after Hospital Discharge: What Are the Difficulties Faced by the Individuals Transitioning to Community Care?	

Concurrent Session Stream G
Thursday, May 31, 2012 (12:45pm – 2:00pm)
**for full abstract details, see the Book of Abstracts (pages 53 to 59)*

G1: Access to Care for Families in Context of Ethnicity Fontaine C			
G1.1 Partnering to Foster Access and Responsiveness of Health Services Delivery: The Case of RICHER	G1.2 Pathway to Care in FGIDs: The Role of Culture and Uncertainty in the Family Group	G1.3 Inequity in Access to Pediatric Cancer Care for Rural and Northern Families: Journey in Photographs	G1.4 Improving Perinatal Outcomes: Evaluation of the Manitoba Health Baby Program
G2: Issues Related to Youth or Violence in Mental Health Fontaine D			
G2.1 Psychosis 101: Evaluation of a Pilot Training Program for Northern and Remote Youth Mental Health Service Providers	G2.2 Modeling the Process Through Which Interpersonal Violence Affects Men and Women's Mental Health	G2.3 From the Streets to the Emergency Department: Transfer Modality and Medical Outcomes for Mental Health Subjects Following Police Use of Force	G2.4 Strategies Used to Manage Service Demand for Child and Adolescent Mental Health Services in Canada
G3: Knowledge Transfer and Networks Fontaine E			
G3.1 Knowledge Uptake Trends: The Case of CHSRF's Mythbusters	G3.2 Innovation Sensation: How Does the Print Media Discuss the Research and Innovation Impacts of Canada's Academic Healthcare Organizations?	G3.3 Influence of Social Networks on Uptake of a Feedback Quality Improvement Intervention in Long Term Care Settings	G3.4 An Inconvenient Truth: Community Networks, Knowledge Translation and Collaboration
G4: Caregivers and Patients' Participation Fontaine F			
G4.1 Ethnicity and Health Literacy: A Survey on Primary Health Care Knowledge	G4.2 Speaking Out: The Influence of the Caregiver Voice on Research to Address Their Education and Support Needs	G4.3 Canadians' Experiences of Health and Illness - First Module on Family Caregiving	G4.4 Engaging Patients for Quality Improvement at St. Mary's Hospital, Montreal
G5: Improving Safety in Different Contexts of Care Fontaine G			
G5.1 Achieving Ontario's Emergency Department Length of Stay performance Targets is Associated with Reduced Mortality and Hospitalization After Discharge	G5.2 Surveillance of In-hospital and Post-Discharge Surgical Site Infections	G5.3 Clinical and Functional Risk Factors for Acute Care and Long-Term Care Admission Among Older Adults with Complex Care Needs	G5.4 Reducing Nursing Interruptions to Improve Patient Safety
G6: Chronic Disease Management Mont Royal			
G6.1 The Status of the Medical Home in Canada After Primary Care Reforms: The Use of Financial Incentives Relevant to Children	G6.2 Comorbid Chronic Illness and the Recognition and Treatment of Depression in Primary Care - What's the Influence of Care Setting?	G6.3 Is It Worthwhile to Invest in Home Care?	G6.4 Exploring the Economic Consequences of Caregiving to Family and Friends in Canada: Applied Analysis of 2007 Figures

Poster Session 1

Tuesday, May 29, 2012 (6:00pm to 7:15pm) Fontaine A B

*for full abstract details, see the Book of Abstracts (pages 61 to 73)

1	Integrated Governance and Cancer Care for the Elderly: Perspectives to Improve Equity and Quality of Care KATHLEEN CHARLEBOIS	25	'Client-Centred Care' - What Does it Really Mean? DANIELLE BENDER
2	An Integrated Approach to Care Delivery for the Elderly with Cancer: can the International Community Converge Around a Common Definition? DOMINIQUE TREMBLAY	26	Measuring Client-Centred Care in the Home and Community Sector DANIELLE BENDER
3	How Effective is Population-Based Cancer Screening? Regression Discontinuity Estimates from Across Canadian Provinces ERIN STRUMPF	27	Pediatric Readmissions: Identifying Appropriate Metrics for Performance Management ASHLEY CORALLO
4	Where are Our Cancer Patients (not) Going? A Retrospective Cohort Study on Palliative care and Emergency Department Utilization by Adult Cancer Patients BEJOY THOMAS	28	Improving the Primary-to-Specialist Referral System for Elective Hip and Knee Arthroplasty in Alberta KENY FYIE
5	Meaningfully Quantifying Patient Ethnicity for Health Services: One Potential Solution and Results from a Stratified Longitudinal Study on Symptom Burden Disparities in Cancer BEJOY THOMAS	29	A Comparison of Primary Health Care Evaluation Frameworks NATALIA YAVICH
6	The Rules of Engagement: Physician Engagement Strategies in Intergroup Contexts SARA KREINDLER	30	Help for Anxiety and Sadness At the End-of-Life: Location of Care Matters FREDERICK BURGE
7	Enabling Change in Health Systems: Tools for Promoting Large System Transformation CAMERON WILLIS	31	A New Model of Dedicated Primary Care Physician and Team Approach for Long-term Care Facilities. Preliminary Findings of a Mixed Method Study EMILY GARD MARSHALL
8	Accountability in Children's Development Organizations DAVID KIRSCH	32	Collaborative Leadership for the Discharge Planning Process in a Neonatal Intensive Care Unit MYURI MANOGARAN
9	A Regional Strategy for Health System Improvement: Champlain Centre of Excellence in Interprofessional Collaborative Practice DANA CROSS	33	Clinical Nurse Specialist Practice in Canada: Role Deployment, Implementation and Impact KELLEY KILPATRICK
10	Effectiveness of Acute Care Geriatric Hospital Units in Preventing Poor Health, Functional and Discharge Outcomes for Acutely Ill Older Adults MARY FOX	34	Pre-Operative Risk Prediction in Geriatric Patients Undergoing Elective Surgery: Systematic Review AGNES GRUDNIEWICZ
11	Developmental Outcomes of Children Exposed to Antidepressants During Pregnancy GILLIAN HANLEY	35	Critical Components in Programs to Divert People in a Mental Health Crisis from Hospital EDs SANDRA TUDGE
12	Inequity in Health Care Use in Rural Bangladesh SYED AHSAN	36	Toward Seamless Patient Care ROBERTA HEALE
13	Physician Remuneration in Canada: A Framework for Outcomes-Based Payment CLARE READE	37	Tracking the Evolution of Hospice Palliative Care in Canada: A Comparative Case Study Analysis of Seven Provinces LILI DEMIGLIO
14	Simulation of the Cost/Effectiveness and Cost/Utility of Prevention Strategies Against Osteoporosis-Related Fractures FRANCOIS ROUSSEAU	38	Alternative Health Care Consultations in Ontario, Canada: A Geographic and Socio-Demographic Analysis LILY DEMIGLIO
15	Outlining Healthcare Utilization for Invasive Meningococcal Disease to Quantify Economic Burden of Disease SANELA GAJIC	39	Patient and Provider Characteristics of Wait Times from Primary Care JAAKIMAINEN
16	The Effect of Economic Downturns on the Nursing Labor Market: Implications for Policy and Planning MOHAMED ALAMEDDINE	40	Is Team-Based Primary Care Associated with Improved Equity in Access to Primary Care Services and Less Self-Reported Unmet Need Across Canada? AUSTIN ZYGMUNT
17	A Cost-Effectiveness Analysis of a National HPV Vaccination Program in Rwanda through Donations by Merck PATRICK GAPARAYI	41	Are Group Medical Visits for Diabetes Effective? A Systematic Review of the Literature LAURA HOUSDEN
18	Developing a Tool to Assess the Quality of Socio-Demographic Data in Community Health Centres MAUDE LABERGE	42	Continuity of Care with Administrative Databases using Year to Year Follow-up by Known Providers PIERRE TOUSIGNANT
19	Family Physician Usage of Electronic Health Records - Results from National Physician Survey ARTEM SAFAROV	43	The Canadian Primary Health Care Research Network: A Patient-Oriented, Research, Training and Policy Network JANUSZ KACZOROWSKI
20	Electronic Medical Records as a Health Intervention GREG MASON	44	Organizational Survey of Acute Care Hospitals in Ontario SEIJA KROMM
21	A Framework for Measuring EMR Benefits in Primary care and Chronic Disease Management GREG MASON	45	Investigating Episodes of Care for Exacerbations of Chronic Obstructive Pulmonary Disease LISA LIX
22	Support for a Public vs. Privately Run Health Care System and Attitudes Regarding Redistribution of Wealth and Societal Intervention ROBERT NESDOLE	46	The Magnitude of Inequalities in Dental Service Utilization in Canada VAHID RAVAGHI
23	Rhetoric or Reality? A Critical Examination of Public Involvement in Canada's Health Systems Decision-Making KATHY LI	47	Moving beyond policy: A Qualitative Study Exploring the use of Contraception by Women of the Andean Indigenous Community of Chilcapamba, Ecuador MELISSA ROY
24	Following the Money: Keeping Health Services Researchers Afloat SATHYA KARUNANANTHAN	48	The Obligation of 'Prevention': Understanding Public Attitudes Towards Population Screening CELINE CRESSMAN

Poster Session 2

Wednesday, May 30, 2012 (5:45pm to 7:30pm) Fontaine AB

*for full abstract details, see the Book of Abstracts (pages 74 to 85)

1	Irrational Decision-Making in the Elderly: why are Pharmacologic Therapies Preferentially Reimbursed Over Non-Pharmacologic Therapies? DHARMINDER SINGH	23	The Developmental Service Worker: A Pilot to Address Nursing Service Challenges DANIELLE BENDER
2	Unanticipated Effects of Strategies Implemented in Healthcare Organizations to Reduce wait Times for Elective Hip and Knee Surgery JUAN CARLOS SABOGAL OLARTE	24	Bringing Hospital Patients 'Home First' - Evidence in Ontario Home Care JEFF POSS
3	Interventions to Improve Physician Chart Documentation: A Systematic Review CYNTHIA BECK	25	Publicly Funded, Private and Informal Home Care Services in Canada: Inter-Relationship and Determinants GUSTAVO MERY
4	Identifying Health Promotion Studies Reporting Sex-Specific Data: Sensitivity and Precision of Published Filters DIANE LORENZETTI	26	Knowledge Management in Healthcare Organizations: Where are we and Where Should we go? SHANNON SIBBALD
5	Improving Emergency Department Physician Documentation: a Systematic Review DIANE LORENZETTI	27	Mapping the Complex Cartography of Health Research Commercialization: A Study of Canadian Basic Biomedical Researchers RENATA AXLER
6	Anticholinergic Load as a Modifiable Risk Factor in Sitter use in Acute Care Hospitals ANNE-MARIE CHARBONNEAU-ALLARD	28	Veterinary Public Health Concerns and Solutions in Northern Saskatchewan JANNA SCHURER
7	Hospitals' Performance in Ontario and Determinants of Patient Satisfaction in Healthcare: a Multilevel Analysis ANNE KONE	29	What are Family Physicians' Perceptions of Guideline Implementation and Uptake? A Qualitative Study AGNES GRUDNIEWICZ
8	Evaluation of Trends in the Cost of Initial Cancer Treatment in Ontario CLAIRE DE OLIVEIRA	30	Injection Drug Use among Homeless Adults with Mental Illness: A Gender-Based Analysis FAITH EIBOFF
9	Cost Effectiveness of Three Cancer Screening Programs GREG MASON	31	Economic Impact of a Housing First intervention for Homeless People with Mental Illness : Preliminary one-year Results of the At Home/Chez Soi Study ANGELA LY
10	Pediatric Cost-Utility Analyses: Characteristics and Quality from 1997-2009 SEIJA KROMM	32	The Mental Health Problems of Homeless Women: Are There Differences by Parenting Status? DENISE ZABIEWICZ
11	Prognostic Indexes for Estimating Mortality Risks MAYVIS REBEIRA	33	Housing First and Emergency Department Use among Homeless Individuals with Mental Illness in Vancouver JASON TAN DE BABIANA
12	Testing an Indicator of Health System Performance: Measuring the Per Capita Health Service Use and Costs of Ontarians HSIEN SEOW	34	A Collaborative Research Agenda Based on a Pan-Canadian Benefits Evaluation Framework for Electronic Medical Record Systems (EMRs) in Primary Care CHAD LEAVER
13	Simulation of an Emergency Department: Physicians as Pseudo-Agents in a Discrete Event Simulation MORGAN LIM	35	Innovative Models and Processes Care Delivery for People with Arthritis AILEEN DAVIS
14	Do Individuals With Private Insurance Use More Prescription Drugs? JILLIAN KRATZER	36	The Population Health Management Challenge: Determining the Capacity to Conduct Practice-Based Population Health (PBPH) Management in Primary Care STEVEN SANCHE
15	Public Drug Plan Expenditures 2010-11 GREG MCCOMB	37	Exploring the Barriers Encountered in Shared Care: The Perspectives of Interdisciplinary Community-Based Palliative Care Teams LILY DEMIGLIO
16	Determining the Implications of Ontario's Legislation and Regulations for Health Care Professions on Interprofessional Collaboration OLENA KAPRAL	38	What Policies Exist in Canada to Support Chronic Disease Self Management? CLARE LIDDY
17	A Configurational Approach to Analyse Contextual Influences on Primary Healthcare (PHC) Reform ROXANE BORGES DE SILVA	39	Impact of Specialist Involvement on Emergency Department (ED) Use in Patients with Chronic Diseases (CD) Managed in Primary Care JEAN-LOUIS LAROCHELLE
18	High Performance in Healthcare Resource Allocation: Six Canadian Cases NEALE SMITH	40	Emerging Types of Primary Care Clinics and Patient Exposure to Clinical Preventive Services SYLVIE PROVOST
19	Fit for Purpose? Introducing a Rational Priority Setting Approach into a Community Care Setting EVELYN CORNELISSEN	41	Change in the Distribution of a Complex Client Population Across Different Types of Primary Health Care Organizations (2005-2010) SYLVIE PROVOST
20	Sport Concussion in Canadian Youth: Prevalence According to 2009-2010 National Population Data and Implications for Policy	42	Continuity of Care with Administrative Databases using Year to Year Follow-up by Known Providers MAUD-CHRISTINE CHOUINARD
21	Mapping Long-Term Residential Care SASKIA SIVANANTHAN	43	The Canadian Contraception Access Survey: Identifying Gaps in Family Planning Health Service Access and Quality WENDY NORMAN
22	Identifying Safety Markers in Homecare Literature: A Scoping Review TANYA BARBER		

Poster Session 3

Thursday, May 31, 2012 (11:45am to 12:45pm) Fontaine AB

***for full abstract details, see the Book of Abstracts (pages 86 to 96)**

1	A Pan-Canadian Perspective of the Surgical Treatment of Cancer BRANDON WAGAR	19	Pilot Feasibility Study of a Personal Health Record (MyOSCAR) Linked with a Clinic Electronic Medical Record MICHELLE HOWARD
2	Cervical Cancer Screening Among Women in Ontario NOUR SCHOUBERI-MYCHASIW	20	The Influence of Electronically Available Wait-Time Data on Choice of Emergency Department for Patients with Non-Critical Medical Complaints BIN XIE
3	Canadian Medical Laboratories (MLs): Quality and Safety BRENDA GAMBLE	21	Instruments Used to Assess KTE Implementation and Impact: A Systematic Review DWAYNE VAN EERD
4	Patient Engagement Strategies to Improve Quality Care: A Systematic Review YVONNE BOMBARD	22	Measuring Impact of Website Aimed at Translation and Dissemination of Evidence-Based Health Care Policy Information: Evaluating Healthydebate.ca JEREMY PETCH
5	Insurance Matters: Access to Prescription Drugs and Dental Care in Children from Low-income Families HYUN SONG	23	Making Sense of Complex Data: Development of a Mapping Process in the Context of a Realist Review of Guideline Implementability MONIKA KASTNER
6	Can Universal Screening for Rare Conditions Ever be Cost-Effective? The Case of Newborn Screening for Biliary Atresia LISA MASUCCI	24	'Road to Recovery?' Policy, Providers, and Mental Health System Performance: A Case Analysis of Two Canadian Provinces MIRANDA BROWN
7	The Short-term Impact of Ontario's Generic Pricing Reforms MICHAEL LAW	25	Mapping the Pathways Linking Mental Health and Chronic Disease: Risk and Protective Factors for the Development of Population Health Initiatives AMANDA SLAUNWHITE
8	An Application of a Proposed Framework for Formulary Listing in Low-Income Countries: The Case of Côte d'Ivoire VAKARAMOKO DIABY	26	Promoting the Production of Quality Indicators in Primary Care Clinical Settings – Results of a Pilot Project with the Réseau de recherche en milieu clinique de première ligne (RRMCLP) MARTINE REMONDIN
9	Examining the Geographical Distribution of French Speaking Physicians in Ontario ALAIN GAUTHIER	27	Modelling the Alberta Optimal Living Option using the RAI-HC Assessment Instrument ROB WEAVER
10	The Stability and Relative Attractiveness of Nurses' Jobs in the Community Sector in Ontario: An Analysis of Registration Records (2003-2010) MOHAMED ALAMEDDINE	28	Critical Literature Review: Predictors of Home Death in Palliative Care Patients ASHLINDER GILL
11	The Development of Panning Tools for Primary Care System Development: Winnipeg Regional Health Authority (WRHA) DEEPA SINGAL	29	Supporting Self-Management for Canadians with Chronic Health Conditions: A Focus for Primary Health Care MARY BYRNES
12	The National IMG Database: An Emerging Picture of International Medical Graduates in Canada TAMARA BROWN	30	Primary Health Care Reform: Identifying its Causal Relationship to Health Care Utilization JULIE HEROUX
13	Access to Health Care Services in Labrador GIOIA MONTEVECCHI	31	Impact of the Quebec Healthcare Reform on the Organization of Primary Healthcare (PHC): A 2005-2010 Follow-up RAYNALD PINEAULT
14	Publicly Funded Human Papillomavirus (HPV) Vaccination - Are We Protecting Those who Need it Most? LEAH SMITH	32	Surveying Adult Weight Management Services in Canada MARIE-FRANCE LANGLOIS
15	Canadians' Satisfaction with Medicare: An Analysis of the Canadian Community Health Survey ALEXANDER PEDEN	33	The Relationship Between Health Promotion Counseling and Health Outcomes in Individuals with Chronic Conditions: Does Anxiety or Depression have a role FATIMA AL SAYAH
16	Case Studies that Illustrate Disinvestment and Reallocation Decision-Making Processes for Health Technologies: A Systematic Review JULIE POLISENA	34	Modeling Costs of Episodes of Care for Exacerbations of Chronic Obstructive Pulmonary Disease JOHN PAUL KUWORNU
17	Buenos Aires Public Health Insurance Effectiveness NATALIA YAVICH	35	Réformes Structurelles et Conditions Propices aux Pratiques de Collaboration : le Cas du Réseau Québécois de Santé Mentale LEO-ROCH POIRIER
18	L'appréciation de la performance et le bulletin Info-performance du Commissaire à la santé et au bien-être Maxime Ouellet		

Detailed Program

Monday, May 28, 2012

Pre-Conference Activities

1:00pm - 4:30pm

CIHR Grant Writing 101

**This session sponsored by the Canadian Institutes for Health Research / Institute of Health Services and Policy Research (CIHR/IHSPR)*

The CIHR Institute of Health Services and Policy Research is pleased to host its annual grant writing workshop, "Grant Writing 101". This pre-conference workshop is intended for graduate students, postdoctoral students, and new investigators who are interested in learning more about the CIHR grant application and grant review processes. This session will feature experts: Dr. Patricia Martens, Director of the Manitoba Centre for Health Policy at the University of Manitoba and Dr. Robyn Tamblyn, Scientific Director of the CIHR Institute of Health Services and Policy Research. Drs. Martens and Tamblyn will present the key elements of a strong grant application, tips and techniques for successful grant writing, and strategies for providing high-quality peer reviews. Participants will be guided in small-group format through a mock peer review and will use CIHR's formal scoring criteria to assess and critique actual CIHR grant applications. Participants will also assess the quality of the peer reviews that the CIHR grant applications received, and learn how to provide a high-quality peer review. CIHR Peer Review Panels will be described. This workshop is an excellent opportunity for trainees to learn about grant writing and grant review processes and will help to build skills necessary for a successful career in research. While the workshop is geared towards individuals who are early on in their health services and policy research careers, it is open to everyone. Registration and the completion of pre-work (including reading the two grants and submitting peer review ratings) is required in order to participate in this workshop. People who have not registered or completed the pre-assigned work will not be able to take part in the workshop, since the workshop absolutely depends upon this pre-work. Please note that attendance is limited to 75 participants and priority will be given to individuals who have not attended in the past.

3:30pm - 5:00pm

Primary Healthcare Theme Group Business Meeting

The agenda will include a review of Theme Group activities during the past year, open discussion regarding current and future activities, and an open forum for updates on new and on-going primary health care initiatives.

4:00pm - 5:30pm

Mental Health Theme Group Business Meeting

5:00pm - 6:00pm

CAHSPR Student Working Group Pre-Conference Primer

Before the conference gets rolling, join your fellow students, along with CAHSPR's incoming president, Adalsteinn Brown, for a quick primer on the background and rationale for the theme of the 2012 conference: "Innovations for Health System Improvement: Balancing Costs, Quality and Equity." After a quick overview, we'll break off into discussion, providing a great opportunity to connect with other students at CAHSPR. Conversations can continue over snacks and drinks at the CHSRF/CIHR-IHSPR Opening Reception.

6:00pm - 8:00pm

CHSRF / CIHR-IHSPR Opening Reception: Celebrating Health Services and Policy Research Innovation

**This session sponsored by the Canadian Institutes for Health Research / Institute of Health Services and Policy Research (CIHR/IHSPR) and the Canadian Health Services Research Foundation (CHSRF)*

Please join us for the annual opening reception of the CAHSPR conference, hosted by the Canadian Health Services Research Foundation (CHSRF) and the CIHR Institute of Health Services and Policy Research (IHSPR). In addition to providing an opportunity to catch up with colleagues and meet new ones over food and drinks, this year's opening reception will celebrate the successes and innovations achieved through the hallmark CADRE program (the Capacity for Applied and Developmental Research and Evaluation in Health Services and Nursing program), which has concluded after making over a decade's worth of impact and contribution to the field. We invite you to join us at 6:00PM for opening celebratory remarks from Robyn Tamblyn (Scientific Director, CIHR-IHSPR) and Maureen O'Neil (President, CHSRF), followed by festivities and mingling from 6:30-8:00PM. This reception welcomes all conference attendees.

Detailed Program

Tuesday, May 29, 2012

Conference Day 1 - (Policy Focus)

7:30am - 9:00am **Networking Breakfast**

9:00am - 9:15am **Welcome Remarks**

9:15am - 10:15am **Keynote Speaker Address: “The Health System at the End of the Universe”**
Presented by: Pierre Gerlier Forest, President, Trudeau Foundation

10:15am - 10:30am **Coffee Break and Transition**

10:30am - 11:45am **Concurrent Sessions – Stream A**

11:45am - 1:15pm **Lunch and Keynote Speaker Address: “Health Care Reform and the Future of American Medicine”**
Presented by: Ezekiel Emanuel, Vice Provost, Global Initiatives and Professor/Chair, Department of Medical Ethics and Health Policy, University of Pennsylvania

1:15pm - 2:45pm **Sub-Plenary Session 1**

Human Resources for Primary Health Care: Moving from Pilots to Real Reform

**This session sponsored by the Canadian Institutes for Health Research / Institute of Health Services and Policy Research (CIHR/IHSPR)
Coordinated by: Ivy Bourgeault, Professor, Interdisciplinary School of Health Sciences, University of Ottawa*

The most critical issues faced when attempting to achieve the most equitable provision of community based primary care services almost entirely implicate health human resources (HHR). This ranges from the most obvious lack of availability of primary health care providers (particularly salient in rural and remote locales) to the less transparent issue of how to organize HHR to deliver on the promise of patient-centred care. This panel brings together international leaders in health human resource research and policy advice to address some of the most pressing and persistent issues in the equitable and patient centred provision of primary care. In answering a series of questions, the panelists will weave cogent argument for the need for evidence-based policies to inform continued reforms of primary health care.

*Presented by: John McKinlay, Senior VP and Director, Institute for Health Service and Disparities Research, New England Research Institute; Gail Tomblin-Murphy, Professor, Dalhousie University; Michael Rachlis, Health Policy Analysis, University of Toronto; James Buchan, Queen Mary University College, Edinburgh, UK
Moderator: Ivy Lynn Bourgeault, Professor, Interdisciplinary School of Health Sciences, University of Ottawa*

Creating High Performing Health Care Organizations

Coordinated by: G. Ross Baker, University of Toronto; Jean-Louis Denis, École Nationale d'Administration Publique (ENAP)

Studies of performance in health care systems have focused mainly on two level of analysis. Work by the Commonwealth Funds and the OECD have focused of the comparison of the performance of national health systems (macro perspective). Many studies of quality of care and patient safety have focused on specific programs or outcomes and the interventions needed to achieve high quality results (micro perspective). These works provide interesting insights on broad determinants of system performance and on the effectiveness of specific interventions in clinical settings to achieve better outcomes. However, addressing each clinical program separately or limiting the analysis to the impact of broad system characteristics (financing, manpower, regulation) does not identify many critical factors that determine success at an organizational or subsystem level. As witnessed by recent legislation in Ontario (Excellent Care for All Act) and current projects to improve quality of surgical care in Saskatchewan, among other initiatives, policy makers and leaders are now focused on creating high value health care across clinical systems and sites. In this session we examine the results of several programs of research that identify the strategies and investments in organizational and system resources to create and sustain high performing systems. And we examine the types of research methods and methodological challenges that help to illuminate the actions and outcomes within these health care systems so that the outcomes from these studies of complex large system change can be used to inform efforts in other systems.

Chaired by: Jean Louis Denis, École Nationale d'Administration Publique (ENAP)

Discussant: Ann Langley, HEC, Montreal

Presented by: Glenn Robert, University College London; G. Ross Baker, University of Toronto; François Champagne, Université de Montréal; André-Pierre Contandriopoulos, Université de Montréal

Detailed Program

Can we Balance the ‘Cost-Quality-Equity Equation’ in Cancer Control?

*Coordinated by: **Lee Fairclough**, VP Knowledge Management, Canadian Partnership Against Cancer; **Jeffrey Hoch**, Co-Director, Canadian Centre for Applied Research in Cancer Control; **Stuart Peacock**, Senior Scientist, British Columbia Cancer Agency; Associate Professor, School of Population and Public Health at the UBC*

Cancer control is grounded in the goals of decreasing the risk of developing cancer, improving the quality of life for those going through an experience of cancer and reducing mortality. Balancing choices that ensure these goals stay in sight is a challenge for any health system, particularly with the constant emergence of new drugs and technologies, increasing demands for services yet the recognition that we need to be focused today on further preventing and detecting cancers early to have sustainable solutions for the future. This session brings together a panel of researchers and system leaders to discuss together and with the audience, the cost-quality-equity equation as it relates to cancer control. The panel will highlight real world experiences that are happening within provinces and at the pan-Canadian level, and research that can help inform both how to approach decision making and to retain a view of cancer control more broadly.

*Presented by: **Craig Earle**, Director of the Health Services Research Program, Cancer Care Ontario and the Ontario Institute for Cancer Research; **Stuart Peacock**, Senior Scientist, British Columbia Cancer Agency; Associate Professor, School of Population and Public Health at the UBC; **Tony Fields**, Chair Provincial Advisory Council on Cancer – Alberta, and Chair of the Expert Review Committee for the pan Canadian Oncology Drug Review (pCODR); **Dan E. Skwarchuk**, Executive Director, Health Services Integration & Innovation Winnipeg Regional Health Authority*

*Chaired by: **Lee Fairclough**, VP Knowledge Management, Canadian Partnership Against Cancer; **Jeffrey Hoch**, Co-Director, Canadian Centre for Applied Research in Cancer Control*

2:45pm - 3:00pm

Coffee Break and Transition

3:00pm - 4:15pm

Concurrent Sessions – Stream B

4:15pm - 4:30pm

Coffee Break and Transition

4:30pm - 6:00pm

Keynote Speaker Address: “Does Money Buy Change?”

*Moderated by: **Adalsteinn Brown**, Dalla Lana Chair of Public Health Policy, University of Toronto, Scientist, Keenan Research Centre of the Li Ka Shing Knowledge Institute of St. Michael’s Hospital*

*Presented by **Dan Florizone**, Deputy Minister of Health, Saskatchewan; **Chris Power**, President and Chief Executive Officer, Capital Health; **Jean Rodrigue**, Assistant Deputy Minister, Health Services and Academic Medicine, Québec Ministry of Health and Social Services; **Michael Decter**, President and Chief Executive Officer, LDIC Inc.*

6:00pm - 7:15pm

CAHSPR Poster Viewing Reception

Detailed Program

Wednesday, May 30, 2012

Conference Day 2

7:30am - 9:00am **Networking Breakfast & Annual General Meetings**

- CAHSPR Annual General Meeting
- Hall Foundation Annual General Meeting

9:00am - 9:15am **Welcome Remarks**

9:15am - 10:15am **Emmett Hall Lecture “Evidenced Based Policy: Utopian Dream, Oxymoron, or Democratic Wish”**

Presented by: Michael Rachlis, Health Policy Analysis, University of Toronto

10:30am - 12:00pm **Sub-Plenary Session 2**

Financial Incentives and Health System Performance

**This session sponsored by Canadian Institute for Health Information (CIHI)*

Coordinated by: Jason Sutherland, School of Population and Public Health, University of British Columbia; Erin Strumpf, Department of Economics and Department of Epidemiology, Biostatistics and Occupational Health, McGill University

Largely unchanged over the past 40 years, the current ‘silo-ed’ budgeting approach creates financial incentives promoting cost minimization within each health care delivery setting, with no single provider or setting bearing accountability or responsibility for population outcomes or costs. Motivated by elective surgery cancellations, emergency department backlogs, and poor continuity of care for patients with chronic conditions, financial incentives for providers are now being actively considered as a means to achieve a broader range of policy objectives, such as increasing efficiency of health care delivery, decreasing wait times and promoting quality of care. For example, activity-based funding (ABF) programs are being implemented in several provinces to improve access to hospital care and pay-for-performance (P4P) programs are being used to decrease wait times in emergency departments. Mixed payment methods including partial capitation are being used in some jurisdictions to improve access, continuity and quality for physician services. While these incentives fail to overcome the silo-based approach to health care funding, they may achieve some of their policy objectives. In this panel, we propose to explore the potential of financial incentives to improve health system performance in Canada that appeals to policy makers and researchers.

Presented by: Meredith Rosenthal, Department of Health Care Policy, Harvard University; Rick Glazier, Senior Scientist and Program Lead, Primary Care and Population Health, Institute for Clinical Evaluative Sciences (ICES); Duncan Campbell, Chief Financial Officer and Vice President, Systems Development and Performance

Integration of Mental Health Services in Primary Health Care

Coordinated by: Jane McCusker, Director, Centre for Clinical Epidemiology, St-Mary’s Hospital; Jan Barnsley, Associate Professor, Department of Health Policy, Management and Evaluation, Faculty of Medicine, University of Toronto

Jointly sponsored by the Mental Health and Primary Care Theme Groups, Canadian Association of Health Services and Policy Research (CAHSPR).

This panel will address the current status of evidence and implementation of collaborative mental health care in Canada, with the aim of developing an agenda for health services and policy research on this topic. Panel members include experts in developing and implementing integrated mental health services in Canadian primary care settings and related research. The panel will present major recommendations from a 2011 position paper produced by the College of Family Physicians of Canada and the Canadian Psychiatric Association that sets directions for expediting flow across the health care system, reducing waiting lists, and improving access to enhance the experience for people requiring services, especially for vulnerable populations that traditionally underutilize mental health services. The panel will discuss: 1) The Challenges of Collaborative Mental Health Care in Canada, 2) The Kinds of Evidence That are Needed by Policy-Makers, 3) The Key Questions to Guide a Research Agenda to Increase our Knowledge of What Works, 4) The Current Status of Canadian Research in This Field, 5) The Research Funding Opportunities, and 6) How This Information Can Best be Disseminated.

Presented by: **Nick Kates**, Professor and Acting Chair of the Department of Psychiatry & Behavioural Neurosciences, McMaster University/Senior Advisor, Health Quality Ontario; **Elliot Goldner**, Professor, Faculty of Health Sciences, Simon Fraser University/Scientific Lead, Knowledge Exchange Centre (KEC)/Chair of the Science Advisory Committee, Mental Health Commission of Canada; **Michel Gervais**, Medical Counsellor, Direction of Mental Health, Ministry of Health and Social Services, Quebec

Detailed Program

Dialogue on Capacity Building in Health Services and Policy Research: Past, Present and Future

**This session sponsored by the Canadian Health Services Research Foundation (CHSRF)*

*Coordinated by: **Erin Leith**, Senior Advisor, Collaboration for Innovation and Improvement at Canadian Health Services Research Foundation; **Gillian Mulvale**, Director, Applied Research and Policy Analysis, Canadian Health Services Research Foundation; **Lindsay Hedden**, University of British Columbia; **Meg McMahon**, Assistant Director, Institute of Health Services and Policy Research, Canadian Institutes of Health Research*

A high-quality, accessible, and sustainable health care system requires a robust health services and policy research (HSPR) community generating innovative research and working with decision makers to translate research evidence into policy and practice. A robust community capable of addressing today's and tomorrow's health system challenges requires high-quality training and mentoring programs and sustained support across diverse career trajectories. Over the past decade, Canada has invested substantially in building capacity in HSPR. This has greatly enhanced the HSPR community's ability to produce leading-edge research evidence and to work with policy and decision makers to apply evidence. Innovative programming is needed to build capacity for cutting-edge investigator-driven and strategic, policy-relevant research, as well as embedded research within health care organizations. When planning for the future of our field, it is important to reflect on lessons learned from the past. Therefore, the overall aim of this session is to lead a fireside chat focusing on efforts to develop capacity for evidence-informed health system improvement across Canada, within the HSPR community as well as among those responsible for developing health policy and service delivery.

*Chaired by: **Terry Sullivan**, President, Terrence Sullivan & Associates. Chair of the Quality Improvement and System Performance group for the Canadian Partnership Against Cancer*

*Presented by: **Alba Dicenso**, McMaster University; **Kaye Phillips**, Canadian Health Services Research Foundation; **Steve Morgan**, University of British Columbia; **Luc Boileau**, L'Institut national de santé publique du Québec; **Robyn Tamblyn**, Scientific Director, Institute of Health Services and Policy Research (IHSPR)*

12:00pm - 1:15pm

Networking Lunch and Awards Presentations

**This session sponsored by The Canadian Institute for Health Information (CIHI)*

- CAHSPR Volunteer Award
- Hall Foundation Student Essay Award
- CHSRF Mythbusters Award
- The 4th annual Article of the Year and Rising Star Awards
- Announcement of 2013 Canadian Harkness Fellows

1:15pm - 2:30pm

Concurrent Sessions – Stream C

2:30pm - 2:45pm

Coffee Break and Transition

2:45pm - 4:00pm

Concurrent Sessions – Stream D

4:00pm - 4:15pm

Coffee Break and Transition

Detailed Program

4:15pm - 5:45pm

Sub-Plenary Session 3

How to Leverage Nursing Care for Health System Improvement and Transformation

*Coordinated by: **Anne Sales**, Professor, Division of Nursing Business and Health Systems, School of Nursing, University of Michigan and Research Scientist, VA Center for Clinical Management Research, VA Ann Arbor Healthcare System, Ann Arbor, Michigan; **Carl-Ardy Dubois**, PhD, Associate Professor, Faculty of Nursing Sciences, University of Montreal, Director, FERASI Center (Training and Expertise in Nursing Administration Research)*

Because nurses are key caregivers involved at all levels of the care continuum, they can significantly influence quality of care provided, patient safety and, ultimately, patient outcomes. As Canadian health care systems are faced with increasing demands for large scale improvement in key areas where performance gaps persist, addressing such demands is dependent, at least in part, on their ability to leverage nursing care as an essential component of their transformation strategies. This session is designed to gain insights about how Canadian health care systems can optimise nursing contributions and use them as a lever to advance and accelerate the health system transformation agenda. Four Themes are addressed: performance measurement and management in nursing care as a tool for guiding service improvement; possibilities offered by advanced practice in nursing to improve service delivery; options for redesigning the organisation of nursing care and its impact on patient safety; and policy implications of leveraging nursing care as a strategy for health system transformation.

*Presented by: **Dorothy Pringle**, Professor Emerita, Lawrence S. Bloomberg, Faculty of Nursing, University of Toronto; **Alba DiCenso**, Former CHSRF/ CIHR Chair in Advance Practice Nursing, Professor, Nursing and Clinical Epidemiology and Biostatistics, McMaster University, Director, Ontario Training Centre in Health Services and Policy Research; **Anne Sales**, Professor, Division of Nursing Business and Health Systems, School of Nursing, University of Michigan and Research Scientist, VA Center for Clinical Management Research, VA Ann Arbor Healthcare System, Ann Arbor, Michigan; **Carl-Ardy Dubois**, PhD, Associate Professor, Faculty of Nursing Sciences, University of Montreal, Director, FERASI Center (Training and Expertise in Nursing Administration Research)*

Drug Insurance in Quebec: Model or Foil?

Coordinated by: The Pharmaceutical Policy Research Collaboration

This bilingual event (with simultaneous translation) will provide researchers, policymakers, health professionals, and stakeholders an opportunity to explore Quebec's pharmacare system, how it might be improved, and what lessons it offers other Canadian provinces. The panel will be moderated by Dr. Vadeboncoeur, Head of Emergency Medicine at the Montreal Heart Institute, Clinical Associate Professor within the Faculty of Medicine at University of Montreal, and expert in medical communication in the media. A review of the pros and cons of the Quebec model of pharmacare will be given by Marc-André Gagnon, an expert in pharmaceutical policy and Assistant Professor with the School of Public Policy and Administration at Carleton University. Dr. Claude Montmarquette, President and Chief Executive Office and Vice-President Public Policies at Centre Interuniversitaire de Recherche en Analyse des Organisations (CIRANO), will provide his expert view on the performance of the Quebec pharmacare regime. Dr. Marie-Claude Prémont, Professor with l'École nationale d'administration publique and expert on issues regarding the privatization of health services, will provide a health law perspective on pharmacare policy. Barbara Martinez, a Principal with Mercer Human Resource Consulting, will provide practical insights about challenges of providing private insurance for pharmaceuticals in Canada.

*Presented by: **Marc-André Gagnon**, Assistant Professor, School of Public Policy and Administration, Carleton University; **Marie-Claude Prémont**, Professor, École Nationale d'administration publique; **Barbara Martinez**, Principal, Health & Benefits, Mercer Human Resource Consulting; **Claude Montmarquette**, Président-directeur général et Vice-président Politiques Publiques, Centre Interuniversitaire de Recherche en Analyse des Organisations (CIRANO); **Régis Blais**, Professor and Director, Department of Health Administration, University of Montreal
Moderator: **Alain Vadeboncoeur**, Chief, Department of Emergency Medicine, Montreal Health Institute*

Detailed Program

Complex Interventions in Health Services and Policy Research

Healthcare systems are complex, dynamic entities that are constantly adapting, evolving and innovating to meet the needs of their many stakeholders (e.g., government, health professionals, patients, the public, etc.). New and oftentimes complex health services and policy interventions are being implemented on a continual basis within all levels of the health system. However, many of these interventions lack rigorous evaluation mechanisms to assess their effectiveness and impact, potentially limiting the application and spread of effective interventions. This creates invaluable opportunities for researchers to work with health system leaders to evaluate what works and why, and to apply the findings to new program and policy design. However, the dynamic and complex nature of healthcare systems also creates challenges for standard approaches to study design and evaluation. New approaches and methodologies are needed to optimize the potential impact of the research on health and health system outcomes. The panel will explore key benefits, opportunities and challenges associated with complex intervention research in the field of health services and policy. It will provide participants with insight into the latest methodologies used to conduct such research with rigour and impact, and will outline current and upcoming funding opportunities that support complex intervention research. The interactive panel will be chaired by Dr. Robyn Tamblyn and involve five panelists with expertise in complex health services and policy intervention research. The first panelist, Dr. Sanjeev Sridharan, will provide an overview of the field, key methodologies, and common opportunities and challenges. Subsequent panelists will present case studies of innovative complex interventions to illustrate different research approaches, facilitators and barriers, and the impact that such research can have on healthcare systems and services. Dr. Michael Schull will discuss a multi-method complex health system intervention involving 90 Ontario hospitals (the Emergency Department Performance Improvement Program). Dr. Paula Goering will discuss a pan-Canadian complex intervention designed to provide housing and supports for people who are homeless and have a mental illness (the At Home/Chez Soi initiative). Dr. Marie France Langlois will discuss an integrated obesity management intervention designed to improve patients' care and health. Dr. Cy Frank will discuss the implementation and evaluation of a complex intervention that resulted in a new and improved model of care for hip and knee replacement patients. As chair, Dr. Tamblyn will moderate the session and facilitate discussion, invite questions from the audience throughout the cases, and provide a brief overview of current and upcoming funding opportunities that support complex intervention research. The panel will address an increasingly important but still evolving area of health services and policy research. It will provide participants with a common understanding of what complex intervention research is, possible methodologies to successfully undertake such research, and insight into some of the common challenges faced and potential strategies to overcome them. Advancing the field of complex intervention research is essential to meet the demands of a more accountable and high-performing healthcare system.

Chaired by: Robyn Tamblyn, Scientific Director, Scientific Director, Canadian Institutes of Health Research

Presented by: **Cyril Frank**, Vice President Research Strategy/Executive Director, Alberta Health Services/Alberta Bone and Joint Health Institute; **Dr. Sanjeev Sridharan**, Scientist, Keenan Research Centre of the Li Ka Shing Knowledge Institute, St. Michael's Hospital; **Dr. Paula Goering**, Professor, University of Toronto; **Dr. Michael Schull**, Senior Scientist, Sunnybrook Health Sciences Centre; **Dr. Marie-France Langlois**, Professeure titulaire, Université de Sherbrooke.

5:45pm - 7:30pm CAHSPR Poster Viewing Reception

Thursday, May 31, 2012

Conference Day 3

7:30am - 9:00am **Networking Breakfast**
9:00am - 10:15am **Concurrent Sessions – Stream E**
10:15am - 10:30am **Coffee Break and Transition**
10:30am - 11:45am **Concurrent Sessions – Stream F**
11:45am - 12:45pm **Poster Viewing and Lunch**
12:45pm - 2:00pm **Concurrent Sessions – Stream G**
2:00pm - 3:15pm **Keynote Speaker Address**

What's Left to be Discovered in Health Services and Policy Research? The Top 5

**This session sponsored by the Institutes for Health Services and Policy Research (CIHR-IHSPR)*

Moderated by: **Robyn Tamblyn**, Scientific Director, CIHR's Institute for Health Services and Policy Research;
Presented by: **Amélie Quesnel-Vallée**, Associate Professor, Joint Appointment in the Departments of Sociology and Epidemiology, Biostatistics and Occupational Health McGill University; **François Champagne**, Scientific Officer, Canadian Health Services Research Foundation (CHSRF); **Adalsteinn Brown**, Chair in Public Health, Dalla Lana School of Public Health, University of Toronto and Scientist, Keenan Research Centre, Li Ka Shing Knowledge Institute of St. Michael's Hospital; **Andreas Laupacis**, Executive Director, Li Ka Shing Knowledge Institute of St. Michael's Hospital, Toronto and Professor, Faculty of Medicine, University of Toronto

3:15pm - 3:30pm **Poster Awards and Closing Remarks**

Kenote Speakers



Adalsteinn (Steini) D. Brown

Adalsteinn Brown became the Dalla Lana Chair of Public Health Policy at the University of Toronto and a Scientist in the Keenan Research Centre of the Li Ka Shing Knowledge Institute of St. Michael's Hospital on the first of January, 2011. Past roles span the public, private, and government sectors and include Assistant Deputy Minister for strategy at the Ontario Ministry of Health and Long-term Care and for science and research at the Ontario Ministry of Research and Innovation, Assistant Professor in the Department of Health Policy, Management, and Evaluation (University of Toronto), and a founding role in consulting, software, and internet companies. He received his bachelor's degree in government from Harvard University and his doctorate from the University of Oxford, where he was a Rhodes Scholar. In 2003, he was named one of Canada's "Top 40 Under 40" in recognition for his work on performance measurement in health care.



François Champagne

Professor of Health Care Management, Health Policy and Health Care Evaluation in the Department of Health Administration, Institut de Recherche en Santé Publique (IRSPUM). Dr. François Champagne is full professor of health care management, health policy and health care evaluation in the Department of Health Administration, researcher at the Institut de recherche en santé publique (IRSPUM), and collaborator in the Unité de santé internationale at the Faculty of Medicine, Université de Montréal. He has been Scientific Officer of the Canadian Health Services Foundation since 2003 and was Chair of the Advisory Board of the Institute of Health Services and Policy Research from 2004 to 2007. He has published books in French, English, Spanish and Portuguese on epidemiology in health services management, research methods, evaluation, quality assurance, and health care organization performance. His current research interests are in the area of strategic management, interorganizational networks, integrated delivery systems, organizational performance and the use of evidence in management. He was one of the co-leaders of HEALNet, a Canadian network of centres of excellence dedicated to research on optimizing the use of research funding to improve decisions in the health system. Since 1976, he has repeatedly acted as a consultant to health care organizations and governments in Canada, France, Africa, Brazil, Haiti, Turkey, the United States and China.



Michael B. Decter

Michael B. Decter is a Harvard trained economist with over three decades of experience as a senior manager. He is a leading Canadian expert on health systems, with a wealth of international experience. As a senior manager in the public sector, Michael served as Deputy Minister of Health for Ontario with responsibility for the management of the Ontario health system serving all residents of the province. He also served as Cabinet Secretary in the Government of Manitoba. As a Senior Research Scholar at the Centre for Bioethics, University of Toronto, Michael Decter authored the book: *Healing Medicare: Managing Health System Change – The Canadian Way*, published in 1994. His second health book, *Four Strong Winds – Understanding the Growing Challenges to Health Care*, was published in June 2000. His third book, *Navigating Canada's Health Care*, co-authored by Francesca Grosso, was published in December 2006. Michael Decter remains active as a public speaker and writer on issues of health reform. He serves as President and Chief Executive Officer of the investment management firm, LDIC Inc. Michael was the Founding Chair of the Health Council of Canada and former Chair of the Saint Elizabeth Health Care. He also served as the Chair of the Canadian Institute for Health Information, the Ontario Cancer Quality Council and Wait Times Data Certification Council of Ontario. He is a Board member of Border Crossings, The Auto Sector Health Care Trust, Medavie Blue Cross and Chair of The Walrus Foundation. In 2004, Michael was awarded The Order of Canada.

Kenote Speakers



Ezekiel J. Emanuel

Ezekiel J. Emanuel is the Vice Provost for Global Initiatives, the Diane v.S. Levy and Robert M. Levy University Professor, and Chair of the Department of Medical Ethics and Health Policy at the University of Pennsylvania. He is also an Op-Ed contributor to the New York Times. He was the founding chair of the Department of Bioethics at the National Institutes of Health and held that position until August of 2011. Until January 2011, he served as a Special Advisor on Health Policy to the Director of the Office of Management and Budget and National Economic Council. He is also a breast oncologist and author. After completing Amherst College, he received his M.Sc. from Oxford University in Biochemistry. He received his M.D. from Harvard Medical School and his Ph.D. in political philosophy from Harvard University. His dissertation received the Toppan Award for the finest political science dissertation of the year. In 1987-88, he was a fellow in the Program in Ethics and the Professions at the Kennedy School of Government at Harvard. After completing his internship and residency in internal medicine at Boston's Beth Israel Hospital and his oncology fellowship at the Dana-Farber Cancer Institute, he joined the faculty at the Dana-Farber Cancer Institute. Dr. Emanuel was an Associate Professor at Harvard Medical School before joining the National Institutes of Health. Dr. Emanuel has authored 3 books and co-edited 4 and will have two books forthcoming in 2012. His publications include *The Oxford Textbook of Clinical Research Ethics*, edited by Dr. Emanuel and members of the NIH Department of Bioethics and Healthcare, *Guaranteed*, Dr. Emanuel's own recommendations for health care reform and, *Exploitation and Developing Countries*. His book on medical ethics, *The Ends of Human Life*, has been widely praised and received honorable mention for the Rosenhaupt Memorial Book Award by the Woodrow Wilson Foundation. Dr. Emanuel has also published *No Margin, No Mission: Health-Care Organizations and the Quest for Ethical Excellence* and co-edited *Ethical and Regulatory Aspects of Clinical Research: Readings and Commentary*. Dr. Emanuel developed *The Medical Directive*, a comprehensive living will that has been endorsed by *Consumer Reports on Health*, *Harvard Health Letter*, the *New York Times*, *Wall Street Journal*, and many other publications. He has published widely on the ethics of clinical research, health care reform, international research ethics, end of life care issues, euthanasia, the ethics of managed care, and the physician-patient relationship in the *New England Journal of Medicine*, the *Lancet*, *JAMA*, and many other medical journals. He has received numerous awards including election to the Institute of Medicine (IOM) of the National Academy of Science, the Association of American Physicians, and the Royal College of Medicine (UK). *Hippocrates Magazine* selected him as Doctor of the Year in Ethics. He received the AMA-Burroughs Welcome Leadership Award, the Public Service Award from the American Society of Clinical Oncology, the John Mendelsohn Award from the MD Anderson Cancer Center, and a Fulbright Scholarship (which he declined). In 2007, Roosevelt University presented Dr. Emanuel with the President's Medal for Social Justice. Dr. Emanuel served on President Clinton's Health Care Task Force, the National Bioethics Advisory Commission (NBAC), and on the bioethics panel of the Pan-American Healthcare Organization. Dr. Emanuel has been a visiting professor at numerous universities and medical schools, including the Brin Professor at Johns Hopkins Medical School, the Kovtitz Professor at Stanford Medical School, the University of Pittsburgh School of Medicine, UCLA, and a visiting professor at New York University Law School.



Dan Florizone

Dan Florizone was appointed Deputy Minister of Health effective August 1, 2008. He holds a Master of Business Administration degree from the University of Regina and a Bachelor of Commerce degree from the University of Saskatchewan. Mr. Florizone has participated in many national and international initiatives, committees and projects. He served as the Chairperson of the Saskatchewan Health Quality Council and is currently a Board Member on the Canadian Patient Safety Institute and the Mental Health Commission of Canada. Mr. Florizone has extensive experience across the province having held senior positions in the health sector in the province of Saskatchewan. He previously served as the CEO of the Five Hills Health Region. He held the position of Assistant Deputy Minister in Saskatchewan Health, was CEO for Moose Jaw-Thunder Creek Health District, as well as the South-East Health District.



Pierre-Gerlier Forest

Pierre-Gerlier Forest is the President of the Trudeau Foundation and has previously served as Assistant Deputy Minister with Health Canada, the Canadian federal Ministry of Health, where he was first appointed to the G.D.W. Cameron Chair (2003) before becoming Chief Scientist (2004-2006). Well known for his work in the areas of health policy and the governance of health care organizations, Pierre-Gerlier Forest also held the position of Director of Research, Commission of the Future of Health Care in Canada (Romanow Commission). He spent most of his academic career at Universite Laval, in Quebec City, where he was Professor of policy analysis and public management with the Department of Political Science (1990-2007). Pierre-Gerlier Forest holds adjunct professorships with the Faculty of Medicine, Universite de Montreal, and the National School of Public Administration (Quebec).



Andreas Laupacis

Dr. Laupacis is a general internist and health services researcher, and the Executive Director of the Li Ka Shing Knowledge Institute of St. Michael's Hospital, Toronto and a Professor in the Faculty of Medicine at the University of Toronto. From 2000-2006 he was the President and CEO of the Institute for Clinical Evaluative Sciences. He has extensive experience with drug reimbursement decisions in the public sector, having been a member of Ontario's Drug Therapeutics and Quality Committee and the first Chair of the Canadian Expert Drug Advisory Committee. Dr. Laupacis has been a member of the Alberta Health Service Board and is currently chair of the Strategic Planning Performance and Risk Management Committee of the Board of Cancer Care Ontario. He edits www.healthydebate.ca.

Kenote Speakers



Chris Power

Chris Power began her health care career as a frontline nurse. Over the years she has served in progressively more responsible leadership roles, both in Halifax and at Trillium Health Centre in Ontario, always maintaining the passion and compassion that led her to health care. In 2006, Chris became president and CEO of Capital Health where she provides strategic leadership to an organization that serves the health needs of the residents of Halifax Regional Municipality and West Hants, and patients throughout the Maritimes. Chris holds a Bachelor of Science in Nursing from Mount Saint Vincent University and a Masters in Health Services Administration from Dalhousie University. She is a Certified Health Executive with the Canadian College of Health Leaders and holds a Fellowship in Management for Executive Nurses from the Wharton School, University of Pennsylvania. In 2003, she received the Award for Excellence and Innovation from the Canadian College of Health Services Executives, in 2007 received an Award of Excellence from the Halifax Progress Club. In 2007, 2008, 2009 was named one of Canada's Top 100 Most Powerful Women in the Public Sector Category and in 2010 was inducted into the Hall of Fame of Canada's Top 100 Most Powerful Women. Chris has been named one of the top 50 CEOs in Atlantic Canada three times. In 2010, she received the Consumers Choice Award for Business Woman of the Year in Nova Scotia. She holds appointments on several Boards and Task Forces at a national level. Chris's love of family, strong faith and gift of singing keep her grounded in what's important.



Amélie Quesnel-Vallée

Amélie Quesnel-Vallée is a medical sociologist and a social demographer with postdoctoral training in social epidemiology. Her research examines the contribution of social policies to the development of social inequalities in health over the lifecourse. With funding from the Canada Foundation for Innovation and the Canadian Institutes for Health Research, she currently studies the impact of public coverage and private health insurance regulation on general and mental health in select OECD countries.



Michael M. Rachlis

Dr. Michael Rachlis was born in Winnipeg, Manitoba in 1951 and graduated from the University of Manitoba medical school in 1975. He interned at McMaster University and then practiced family medicine at the South Riverdale Community Health Centre in Toronto for eight years. He completed specialty training in Community Medicine at McMaster and was made a fellow of the Canadian Royal College of Physicians in 1988. Dr. Rachlis practices as a private consultant in health policy analysis. He has consulted to the federal government, all ten provincial governments, and two royal commissions. He is also an associate professor (status only) with the University of Toronto Dalla Lana School of Public Health. In 2010, the University of Manitoba conferred upon Dr. Rachlis a doctor of laws in recognition of his service to Canadian health policy. Dr. Rachlis has lectured widely on health care issues. He has been invited to make presentations to committees of the Canadian House of Commons and the Canadian Senate as well as the United States House of Representatives and Senate. He is a frequent media commentator on health policy issues and the author of three national bestsellers about Canada's health care system. In his spare time, Dr. Rachlis enjoys cycling and duplicate bridge.



Jean Rodrigue

As a general practitioner, Dr. Jean Rodrigue practised family medicine for many years in a rural area at the Centre local de services communautaires (CLSC) des Etchemins. He later practised in Montréal, at the CLSC des Faubourgs and Hôpital Notre-Dame. Throughout his career, he has held various medico-administrative functions, including head of the general practice department at Hôpital Notre-Dame; at the Federation of General Practitioners of Québec, he was director of planning and regionalization and head of the Communications Department. A member of the family medicine department at Université de Montréal, Dr. Rodrigue has co-authored a reference document aimed at informing all residents on the legislative, ethical and organizational aspects of practising medicine in Québec. He holds a master's degree in community health, his dissertation having focused on the episode of care concept. Until just recently, Dr. Rodrigue was the director of medical and academic affairs and professional partnership affairs at the Agence de la santé et des services sociaux de la Montérégie. He currently holds the position of Assistant Deputy Minister responsible for the Direction générale des services de santé et médecine universitaire at the Ministère de la Santé et des Services sociaux du Québec.



Robyn Tamblin

Professor, Department of Medicine and Department of Epidemiology and Biostatistics, McGill University, Faculty of Medicine
Dr. Robyn Tamblin is a Professor in the Department of Medicine and the Department of Epidemiology and Biostatistics at McGill University. She is a James McGill Chair, a Medical Scientist at the McGill University Health Center Research Institute, and the Scientific Director of the Clinical and Health Informatics Research Group at McGill University. Dr. Tamblin's ground-breaking research on educational outcomes has elucidated important relationships between health professional training, licensure and practice that have subsequently guided credentialing policies. Her work on prescription drug use, its determinants, and computerized interventions to improve drug safety (MOXXI) have been recognized internationally. She leads a CIHR-funded team to investigate the use of e-health technologies to support integrated care for chronic disease, and co-leads a Canadian Foundation for Innovation Informatics Innovation Laboratory to create advanced technologies to monitor adverse events in populations and create new tools to improve the safety and effectiveness of health care. Her work is published in the Journal of the American Medical Association, the Annals of Internal Medicine, the British Medical Journal, Medical Care, Health Services Research, among others. She has been awarded the CHSRF KT award for her research in improving the use of medication as well as the ACFAS Bombardier award for innovation in the development of a computerized drug management system. As of January, 2011, she became the Scientific Director of the Institute of Health Services and Policy Research at the Canadian Institutes of Health Research.

2012 CAHSPR Conference

Supporting Students

The individuals and organizations that make up CAHSPR are committed to providing students with opportunities to engage in professional activities at the annual CAHSPR conference and throughout the year. With the support of the conference sponsors identified below, CAHSPR launched a new student fee waiver and travel subsidy program this year. This offered critical financial support for student presenters at CAHSPR who would not otherwise have funding to attend the conference. When this is combined with subsidies for all student registration fees, over \$70,000 was provided to support student attendance at the 2012 conference! Thank you sponsors!

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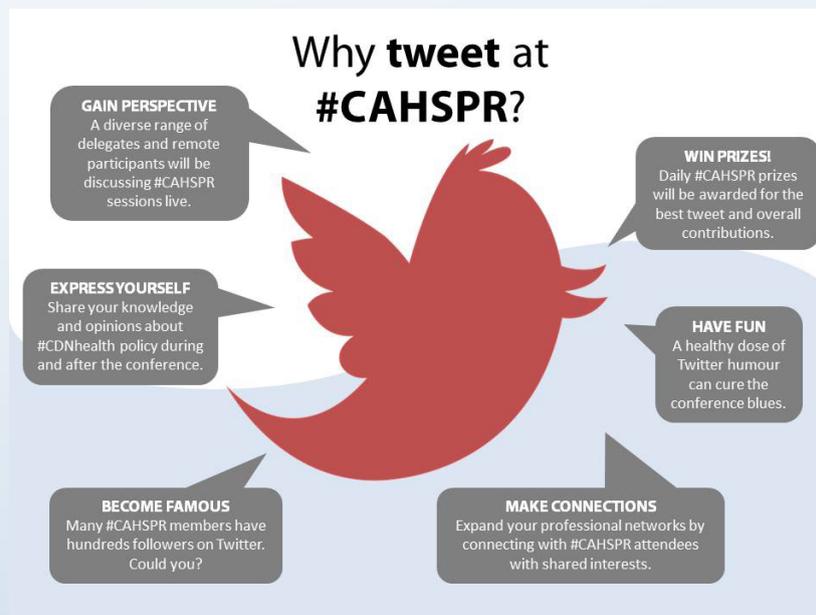
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The Pharmaceutical Policy Research Collaboration (PPRC)

CAHSPR Goes Social!!

CAHSPR has taken the plunge into the world of social media! We have started a LinkedIn Group and a Facebook page and we are filming conference highlights for online distribution. Keep an eye out for the film crew and look for yourself in highlight videos that will be posted online following the conference!

You can also follow live conversations about the conference on Twitter using the hashtag #CAHSPR.



Institute of Health Services and Policy Research Institut des services et des politiques de la santé



This **IHSPR Article of the Year Award** recognizes published research that has significantly contributed to the advancement of the field of health services and policy research in Canada. One award is granted each year.

The **IHSPR Rising Star Award** recognizes the research excellence and innovative knowledge translation (KT) initiatives of graduate students (M.A., M.Sc. and PhD) and post-doctoral Fellows studying in health services and policy research at a Canadian institution. Up to three awards are granted each year.

The deadline for the Award is February 1, 2013. For more details please visit our website.

To learn more about CIHR-IHSPR's strategic initiatives and to stay up-to-date about funding launches, information sessions, and other important news, visit us on the web at www.cihr-irsc.gc.ca/e/13733.html or contact us at IHSPR@cihr-irsc.gc.ca.



Le prix des étoiles montantes de l'ISPS récompense des étudiants diplômés (M.A., M.Sc. et Ph.D.) et des boursiers postdoctoraux fréquentant un établissement canadien pour leur excellence en recherche et leur innovation en application des connaissances (AC) sur les services et les politiques de la santé. Jusqu'à trois bourses sont décernées chaque année.

Le prix du meilleur article de l'année d'ISPS vise à reconnaître la valeur des travaux de recherche publiés ayant contribué de façon importante aux progrès réalisés au chapitre des services et des politiques de la santé au Canada. Un prix est décerné chaque année.

La date limite de présentation des nominations pour les prix est le 1 février 2013. Pour en savoir plus, veuillez visiter notre site Web.

Pour en savoir davantage sur les initiatives stratégiques de l'ISPS des IRSC ou pour rester à l'affût des possibilités de financement, des séances d'information et d'autres nouvelles importantes, rendez-vous à l'adresse www.cihr-irsc.gc.ca/f/13733.html ou écrivez-nous au IHSPR@cihr-irsc.gc.ca.

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Mark Your Calendars!

**The date and location has been set for the 10th Annual
CAHSPR Conference**

**May 27-30, 2013
Vancouver, British Columbia
Sheraton Wall Centre**

**Stirling Bryan (2013 Conference Co-Chair)
Director, Centre for Clinical Epidemiology & Evaluation
Vancouver Coastal Health Research Institute**

**Heather Davidson (2013 Conference Co-Chair)
Assistant Deputy Minister
Planning and Innovation, Ministry of Health**

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