School of Policy Studies
Queen’s University

MPA 836

“Health and Public Policy in Canada”

Tuesday September 11 – Tuesday November 27, 2018

1:30 – 4:30

Robert Sutherland Hall, Room 448.

Professors

David Walker MD is Stauffer-Dunning Chair and Executive Director of the School of Policy Studies; former Dean of the Faculty of Health Sciences at Queen’s; Professor in Emergency Medicine, Family Medicine and Policy Studies and previous Chair of provincial government commissions or Boards concerned with SARS, Care of the Elderly and Public Health.
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Duncan Sinclair PhD is former Dean (both Faculty of Health Sciences and Faculty of Arts and Science) and Vice-Principal at Queen’s University and was Chair of the Ontario Health Services Restructuring Commission.
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Design

This is an elective course intended to enhance students’ understanding of the policy framework underpinning the functions and interrelationships of the elements of Canada’s healthcare’s “system” and provide the opportunity to explore policy alternatives to the status quo.

The course is offered in a non-traditional, highly interactive, learning environment where all views and expressions are respected.

Texts and references are suggested but, by real-time exploration, students will be guided to understand the complexities of healthcare, the variable determinants of a society’s health, the policies, structures and institutions that support a system (with comparative international examples) and the metrics for success and accountabilities to patients, families, funders and government.
Students are expected to participate, to identify, analyse and critique issues and policies verbally and in writing and to be involved in team-based policy development as they would, and many will be, in the work-place.

Students who prefer a more traditional text and assignment-based course structure may find this approach rather different.

Goal

Students will be encouraged to:

- develop as critical thinkers,
- be able to identify health policy issues (at the provincial, federal or global level),
- search for, marshall, analyse and critically appraise evidence bearing on those issues and
- develop, concisely describe and defend, orally and in writing, realistic policy options for healthcare reform and implementation as if to an audience of the deputy and Minister of Health and Long-Term Care or equivalent.

Conditions

Twelve 3 hour sessions, many with guests from the world of healthcare
Teamwork required
Student presentations required
Individual class participation expected
Final briefing paper required

Student responsibilities in the course

1. **Mini-presentations**

3 students each week (names drawn at random) - 3 minutes per student

Purpose:

To draw to the attention of the class a particularly interesting recent article bearing on health systems, health care, health policy; with subsequent class discussion

The following sources are suggested for regular reading but many others are available and acceptable:

- The King’s Fund
- Longwoods
- The Commonwealth Fund
2. **Team Policy Presentations**

The class will be formed into four-person teams by alphabetic clustering.

The Policy Presentations to be developed are described in the weekly course calendar that follows below (beginning October 2). After the teams have been formed, the order in which they will present will be drawn from a hat to match with the policy topic under discussion that week.

Each team, on its assigned day, is required to:

- Describe the major system problem they consider to be amenable to resolution or mitigation by policy development or policy change.
- Present the proposed policy, or policy options, which address the issue at hand; derive evidence that supports the selected policy option; address the various ramifications and implications of the policy option (e.g., financial, political); outline implementation steps and how and over what time line success or failure might be measured.

The team will present, together, for 30 minutes **maximum** following which there will be questions and discussion from the class, the deputy and Minister and any expert retained by the Minister.

*A pre-circulated written policy brief* shall be distributed electronically before the start of the class (preferably the prior evening).

The brief and policy presentation shall be constructed as if given by early/mid-career public servants to a new Minister of Health, elected recently. In civilian life he owns a car dealership and was mayor of a medium sized town. He is supported by a new Deputy Minister (DM) who has spent his entire previous public service in another Ministry. From time to time, the Deputy has arranged that a visiting expert will be available to provide advice on the topic.
3. **Final Policy brief**

Create a 1000-word health policy briefing note in which you propose, support and defend one new health policy to which you would give highest priority were you to be advising a Minister of Health, Federally or Provincially/Territorially, or the Mayor of a major municipality. It should relate to, and be identified with, one or more of the fundamental principles of Canada’s health care framework. You should provide referenced evidence to support the policy proposed and the brief should be accompanied by an annotated bibliography.

Implementation considerations should be included and measures of success identified. The approximate cost of the policy should be estimated and the political, cultural, and other ramifications described.

To be submitted as follows:

1000 words, exclusive of the **required** annotated bibliography, to be submitted electronically, in **Word format**, by midnight December 10.

Students will be informed as to which instructor they should submit their final brief.

**Evaluation and Grading of Final Brief**

Coherence: 50% - Do the arguments in the brief hold together to make a coherent, convincing whole?

Basic knowledge: 25% - Does the supporting knowledge give you confidence that the author has a good working understanding of how health/healthcare is structured and works in Canada?

Style/readability: 10% - Is the brief interesting, readable, and free of grammatical errors?

Originality/novelty/flair: 15% - Is there evidence in the brief of original thinking, new ideas, novel approaches, etc.?

4. **Participation**

The class experience is intended to encourage individual and collective participation in an environment of respect and listening.
Final Grading will be based on:

- Mini-presentations 5%
- Debate 40%
- Final Policy brief 40%
- Class Participation (quality > quantity; incl attendance) 15%

Readings to support your learning

- *Better Now: Six Big Ideas to Improve Health Care for all Canadians* Danielle Martin, pub Penguin
- *Matters of Life and Death: Public Health Issues in Canada* Andre Picard, pub Douglas & McIntyre
- *Being Mortal* Atul Gawande, pub. Doubleday
- *In Search of the Perfect Health System* Mark Britnell, pub MacMillan Education, Palgrave – esp. Chapter 1

Week 1

Sept 11  **Introductions** (please bring your name cards to all sessions)
Review of course structure, expectations, evaluation
Class discussion:

*Health policy issues confronting Canada and the world.*

“A History Lesson – how we got where we are” – DGS

Week 2

Sept 18  “Canada’s Healthcare System - where we are now” - DMCW
5:30 pm  **Class BBQ** at Walker’s house, 240 Alwington Place, Kingston

Week 3

Sept 25  **Funding and Sustainability**
Guest: Don Drummond
Stauffer-Dunning Fellow, QSPS; chair, Commission on the Reform of Ontario’s Public Services; former Chief Economist, TD Bank; former Associate Deputy Minister, Federal Department of Finance

Week 4
Oct 2 Public Health

Team Presentations

A Policy to address Opiate related addiction and deaths
A Policy to address low vaccination rates

Guest: Dr. Kieran Moore

Chief Medical Officer of Health, Kingston Frontenac, Lennox and Addington; Professor, Emergency Medicine, Family Medicine, Queen’s University

Week 5
Oct 9 Current health system challenges (continued) – DW and DGS

Class discussion

Week 6
Oct 16 Institutions

Team Presentations

A Policy to address overcrowding of Emergency Departments
A Policy to address the Aging Population

Guest: Dr. David Pichora

President and CEO, Kingston Health Sciences Centre, Professor of Surgery and Mechanical Engineering, Paul B. Helliwell Chair in Orthopaedic Research, Queen’s University

Week 7
Oct 23 Primary and Community Care

Team Presentations

A Policy to address primary care accessibility
A Policy to address the needs of the elderly in the community
Guest: Dr. Michael Green
Professor and Head, Department of Family Medicine; Director, Health Services and Policy Research Institute, Queen's University

Week 8
Oct 30 Health Human Resources
Team Presentations
A Policy to address the effects of AI on healthcare
Guest: Dr. Jeffrey Turnbull O.C.
Past Chief of Staff, The Ottawa Hospital; former President of the Canadian Medical Association

Week 9
Nov 6 Mental Health & Addictions
Team Presentations
A policy to address stigma
A Policy to address access to mental health services
Guest: Don Seymour
CEO, Addictions and Mental Health Kingston, Frontenac, Lennox and Addington

Week 10
Nov 13 Quality
Team Presentation
A Policy to address quality in healthcare
Guest: Melissa Farrell
Associate Deputy Minister, Health System Quality and Funding, Ministry of Health and Long-Term Care, Ontario

Week 11
Nov 20 Health Policy Conference
Week 12

Nov 27  Health and the Broader Societal Context

Guests:

Hersh Sehdev – Board Chair, SE-LHIN

Hugh Segal O.C. – Principal, Massey College

Keith Banting – Stauffer-Dunning Fellow, Professor Emeritus, QSPS

By Dec 10  1000 word **Policy Brief** due, electronically submitted in Word

August 20, 2018