Course Name: HAD 6763H Health Policy Comprehensive Course

Institute of Health Policy, Management and Evaluation (HPME)

Semester: Winter 2016

Course Director: Greg Marchildon, PhD, Professor greg.marchildon@utoronto.ca

Course Description

The health policy comprehensive course is the capstone course in the series of 3 health policy courses for PhD students in IHPME. The comprehensive course is primarily intended to capture the 'breadth' dimension of the field, and to complement the 'depth' expected in the thesis. This is not a 'taught' course. Students are expected to lead discussion of the readings with the course instructor serving as a resource for the class.

Prerequisite Knowledge

Students will have completed HAD 5021.

Health Policy Comprehensive Course: Evaluation

The comprehensive examination provides the opportunity for students to demonstrate their competence in the field of health policy. Specifically, the student is expected to demonstrate:

- A comprehensive understanding of a range of conceptual and theoretical issues relevant to health policy
- A comprehensive understanding of the structure and ongoing evolution of health systems in Canada
- A developed ability to apply relevant concepts and theories to topical issues in health policy
- An ability to present ideas clearly and cogently

The grade for the Health Policy Comprehensive Course will be based on two elements: a written examination (50%) and an oral examination (50%). The final grade will be reported to the School of Graduate Studies as 'credit' or 'no credit'.

The Written Examination

Students will be asked to work together as a group to develop a set of 10 eligible comprehensive examination questions. Of these 10, 5 will be included in a take-home written examination. Students are to answer 3 of these 5 questions in an essay style (each essay to be 2,500 to 3,500 words in length) and will be given 5 working days to do so. Students will be expected to pass the written examination before proceeding to the oral examination. Those who do not pass on a first attempt will be given an opportunity to rewrite.

The written examination will be marked by the course director and at least one other policy faculty member. To minimize personal bias, or the appearance of bias, examiners will endeavour to be blind to the student's identity until marks have been assigned. To maintain anonymity, completed examinations are to be formatted in the following manner:

- Times New Roman, 12 point font
- Brief title in header: "Comprehensive examination by [student number]"
- Pagination in footer, centre justified
- 1 inch margins
- Section titles and subtitles numbered (1, 1a, etc.) and underlined
- Please avoid identifying information (e.g., your specific expertise, interests or policy role).

Example questions from previous years:

- While not yet specified as formal policy, many analysts believe that the current federal government is likely to shift entirely to tax points in transferring funds to the provinces in support of Medicare. Drawing on what you know about how the CHA operates as a policy instrument, provide your analysis of what such a formal policy change might imply for Medicare in Canada.
- Waiting lists continue to attract media attention and to influence policy development across the health care system (e.g., ALC and Aging at Home). Drawing on your knowledge of the agenda setting literature (including causal stories, framing, etc.), explore the continued prominence of this policy issue.

The Oral Examination

Students will be required to complete an oral examination to review their responses on the written examination, address questions arising and further demonstrate their competence in the field of health policy. The oral examination will take place at a mutually convenient time, normally within 3 weeks of the submission of the written examination. It is expected that students will receive comments on their completed written examination approximately one week before the oral examination.

The panel for the oral examination will consist of the course director plus at least one other policy faculty member. Typically, the oral will last 1 hour. Students will be expected to have prepared a brief (5 minute) overview of the main arguments for each of the 3 questions they answered; they are not limited to the written answer they have already provided but should also reflect on ways in which these arguments might be modified or improved. Starting with the first question, students will present each answer, followed by 15 minutes of Q&A. Students are welcome to bring their notes. It is not expected that students will prepare a slide deck to show or circulate.

Plagiarism:

NB. Referencing. You <u>must</u> cite sources for your ideas and evidence (in written work and the oral defence). Acknowledging that you are using someone else's work is a matter of academic integrity.

Failing to reference the work of others is a serious academic offense that cannot be explained away on the basis of ignorance. If you are unclear about what plagiarism is or how to avoid it, Georgetown University offers very clear and helpful advice at http://www.georgetown.edu/honor/plagiarism.html

Timetable - Winter 2015

Seminar sessions will be held on Monday afternoons, 2:00 – 4:30 in Room HA 409.

May 8, 2015 is the deadline for submission of second-term and full-year grades for students not convocating in June; thus we aim to complete all examinations by this date.

Approximate schedule for examinations: [TBC]

Written examination: April 13-17 Oral examinations: Week of May 4th

Dates	Sessions
January 11	
January 18	
January 25	
February 1	
February 8	
February 15	Family Day – No class
February 22	
February 29	*share questions
March 7	
March 14	No class
March 21	
March 28	Last class
April 6	Easter Monday - No class
April 11 – 15	Week of written exam
April 21	Written comments returned
May 2 - 5	Week of oral exam

Course Materials

There is no set reading list for the comprehensive course. Health policy students are expected to have a developed knowledge of (i) a range of concepts and theories relevant to health policy studies, as well as (ii) health policy issues in the Canadian context. Below, we review these two areas and provide a list of relevant material for students to consider, add to and prioritize.

CONCEPTS & THEORY FOR HEALTH POLICY STUDIES

The following section lists a variety of theoretically explicit texts – not necessarily specific to health policy – that identify key concepts and theories relevant to health policy studies. They are organized across the following domains:

- Policy cycles & policy subsystems
- Policy agendas
- Policy instruments & governance
- Policy implementation
- Policy change
- Comparative policy studies
- Professions, professionalism
- Performance & accountability

Useful sources for basic concepts in policy studies are:

- *International Encyclopedia of the Social & Behavioral Sciences*. http://go.utlib.ca/cat/4208795
- Encyclopedia of Public Administration and Public Policy, Second Edition. http://go.utlib.ca/cat/5096030

See also: Howlett M, Ramesh M, Perl A. 2009. *Studying Public Policy: Policy Cycles & Policy Subsystems*. Third Edition. Don Mills: Oxford University Press. http://go.utlib.ca/cat/6916778

1. Policy cycles & Policy subsystems

Recommended

Richardson, J. (2000). Government, interest groups and policy change. *Political studies*, 48(5), 1006-1025. http://simplelink.library.utoronto.ca/url.cfm/460092

Weible, C. M., Sabatier, P. A., McQueen, K. (2009). Themes and variations: Taking stock of the advocacy coalition framework. *Policy Studies Journal*, *37*(1), 121-140.

Howlett, Michael, Allan McConnell, and Anthony Perl. "Reconciling Streams and Stages: Avoiding Mixed Metaphors in the Characterization of Policy Processes." (2013).

Howlett, M., & Maragna, A. (2006). How big is a policy network? An assessment utilizing data from Canadian royal commissions 1970–2000. *Review of Policy Research*, 23(2), 433-452.

Jochim, Ashley E., and Peter J. May. "Beyond subsystems: Policy regimes and governance." *Policy Studies Journal*, 38.2 (2010): 303-327.

Additional

deLeon, P. "The Stages Approach to the Policy Process: What Has It Done? Where Is It Going?" In Theories of the Policy Process, edited by P. A. Sabatier, 19–34. Boulder: Westview, (1999). [available from the instructor]

Howlett, Michael, and M. Ramesh. 1998. "Policy Subsystem Configurations and Policy Change: Operationalizing the Postpositivist Analysis of the Politics of the Policy Process." *Policy Studies Journal*, 26 (3): 466–481.

Weible, C. M., Sabatier, P. A., Jenkins-Smith, H. C., Nohrstedt, D., Henry, A. D., & deLeon, P. (2011). A quarter century of the Advocacy Coalition Framework: An introduction to the special issue. *Policy Studies Journal*, *39*(3), 349-360.

Lewis, Jenny M. "Being around and knowing the players: networks of influence in health policy." *Social Science & Medicine*, 62.9 (2006): 2125-2136.

2. Policy agendas

Recommended

Rochefort, D. (2011) Agenda Setting. *Encyclopedia of Public Administration and Public Policy, Second Edition*. Taylor and Francis: New York, Published online: 02 Apr; 71-75. Available: http://go.utlib.ca/cat/5096030*

*NB. Click on 'connect to resource' and then search by title

Stone DA. 1989. Causal stories and the formation of policy agendas. *Political Science Quarterly*, 104(2): 281-300.2.

Baumgartner FR, Jones BD. 1991. Agenda dynamics and policy subsystems. *Journal of Politics*, 53(4): 1044-74.

Béland, Daniel. 2005 "Ideas and social policy: An institutionalist perspective." *Social Policy & Administration*, 39(1): 1-18.

Additional

Kingdon JW. 2003. Agendas, Alternatives, and Public Policies. Second Edition. New York: Longman.

http://go.utlib.ca/cat/5021691

Béland, Daniel. "Ideas, institutions, and policy change." *Journal of European Public Policy* 16.5 (2009): 701-718.

Lewis JM, Considine M. 1999. Medicine, economics and agenda-setting. *Social Science & Medicine*, 48: 393-405.

Baumgartner, Frank R., Christoffer Green-Pedersen, and Bryan D. Jones. "Comparative studies of policy agendas." *Journal of European Public Policy* 13.7 (2006): 959-974. http://simplelink.library.utoronto.ca/url.cfm/460093

3. Policy Instruments & Governance

Recommended

Tenbensel, T. (2008). How do governments steer health policy? A comparison of Canadian and New Zealand approaches to cost control and primary health care reform, *Journal of Comparative Policy Analysis*, 10(4): 347–363. Available: http://simplelink.library.utoronto.ca/url.cfm/459982

Greener, I., & Powell, M. (2008). The changing governance of the NHS: Reform in a post-Keynesian health service. *Human relations*, 61(5), 617-636.

Glor, Eleanor D. "Has Canada Adopted the New Public Management?." *Public Management Review* 3.1 (2001): 121-130. http://simplelink.library.utoronto.ca/url.cfm/460094

Howlett, Michael. "Beyond good and evil in policy implementation: Instrument mixes, implementation styles, and second generation theories of policy instrument choice." *Policy and Society*, 23.2 (2004): 1-17.

Additional

Canada (2007). Assessing, Selecting, and Implementing Instruments for Government Action. Treasury Board of Canada Secretariat. Available: http://www.tbs-sct.gc.ca/rtrap-parfa/asses-eval-eng.pdf

Burau, Viola, and Karsten Vrangbæk. "Institutions and non-linear change in governance: reforming the governance of medical performance in Europe." *Journal of health organization and management*, 22.4 (2008): 350-367.

Howlett, Michael. "Governance modes, policy regimes and operational plans: A multi-level nested model of policy instrument choice and policy design." *Policy Sciences* 42.1 (2009): 73-89.

Börzel, Tanja A. "Networks: reified metaphor or governance panacea?." *Public Administration* 89.1 (2011): 49-63. http://simplelink.library.utoronto.ca/url.cfm/460095

Contandriopoulos, Damien, Jean-Louis Denis, Ann Langley, and Annick Valette. "Governance structures and political processes in a public system: lessons from Quebec." *Public administration* 82, no. 3 (2004): 627-655. http://simplelink.library.utoronto.ca/url.cfm/460096

4. Policy implementation

*Implementation issues bring policy analysts into conversation with the realities of organizational behavior; thus, I have included two important texts – with great relevance to policy studies – that speak to the dynamics governing organizational behavior

Recommended

Bowman, A.O'M. (2011). Policy Implementation. Encyclopedia of Public Administration and Public Policy, Second Edition. Taylor and Francis: New York, Published online: 02 Apr; 1487-1490. Available: http://go.utlib.ca/cat/5096030*

*NB. Click on 'connect to resource' and then search by title

Hinings CR, Casebeer A, Reay T, Golden-Biddle K, Pablo A, Greenwood R. 2003. Regionalized healthcare in Alberta: Legislated change, uncertainty and loose coupling. *British Journal of Management*, 14: S15-130.

*Paul J. DiMaggio and Walter W. Powell. 1983. The Iron Cage Revisited: Institutional Isomorphism and Collective Rationality in Organizational Fields. *American Sociological Review*, 48(2): 147-160.

*Ashworth, Rachel, George Boyne, and Rick Delbridge. "Escape from the iron cage? Organizational change and isomorphic pressures in the public sector." *Journal of Public Administration Research and Theory*, 19.1 (2009): 165-187.

Hupe, Peter, and Michael Hill. "Street-level bureaucracy and public accountability." *Public Administration*, 85.2 (2007): 279-299.

Checkland K. 2004. National service frameworks and UK general practitioners: Street-level bureaucrats at work? *Sociology of Health & Illness*, 26(7): 951-975.

Additional

May, Peter J., and Søren C. Winter. "Politicians, managers, and street-level bureaucrats: Influences on policy implementation." *Journal of Public Administration Research and Theory*, 19.3 (2009): 453-476.

Evans, Tony. "Professionals, managers and discretion: critiquing street-level bureaucracy." *British Journal of Social Work*, 41.2 (2011): 368-386.

Denis JL, Hébert Y, Langley A, Lozeau D, Trottier LH, "Explaining Diffusion Patterns for Complex Health Care Innovations." *Health Care Management Review*, 27:3, 60–73, 2002.

Matland. 1995. Synthesizing the implementation literature: the ambiguity-conflict model of policy implementation. *Journal of Public Administration Research and Theory*, 5: 145-174.

5. Policy change

Recommended

Pierson P. 1993. When effect becomes cause: Policy feedback and political change. *World Politics*, 45 (July): 595-628.

Thelen, Kathleen. "Institutional change in advanced political economies." *British Journal of Industrial Relations*, 47.3 (2009): 471-498.

Rayner, Jeremy, and Michael Howlett. "Introduction: Understanding integrated policy strategies and their evolution." *Policy and Society* 28.2 (2009): 99-109.

Hacker, Jacob S. "Privatizing risk without privatizing the welfare state: The hidden politics of social policy retrenchment in the United States." *American Political Science Review*, 98.2 (2004): 243-260.

Béland, Daniel. "Policy change and health care research." *Journal of Health Politics, Policy and Law*, 35.4 (2010): 615-641.

Bhatia V. (2010) Social Rights, Civil Rights, and Health Reform in Canada. *Governance: An International Journal of Policy, Administration, and Institutions*, 23(1):37-58.

Additional

Kay, Adrian. "A critique of the use of path dependency in policy studies." *Public administration*, 83.3 (2005): 553-571.

Howlett, Michael, and Jeremy Rayner. "Understanding the historical turn in the policy sciences: a critique of stochastic, narrative, path dependency and process-sequencing models of policymaking over time." *Policy Sciences*, 39.1 (2006): 1-18.

Rayner, Jeremy. "Understanding policy change as a historical problem." *Journal of Comparative Policy Analysis*, 11.1 (2009): 83-96.

Howlett M. 2009. Process sequencing policy dynamics: Beyond homeostasis and path dependency. *Journal of Public Policy*, 29(3): 241-262.

Hall, P. and Taylor, R. (1996). 'Political science and the three new institutionalisms'. *Political Studies*, 44 (5): 936–57.

Battilana J, Leca B, Boxenbaum E. 2009. 2 How Actors Change Institutions: Towards a Theory of Institutional Entrepreneurship, The Academy of Management Annals, 3(1): 65-107.

Lawrence, Thomas, Roy Suddaby, and Bernard Leca. "Institutional work: Refocusing institutional studies of organization." *Journal of Management Inquiry*, 20.1 (2011): 52-58.

Van der Heijden, Jeroen. "Institutional layering: A review of the use of the concept." *Politics* 31.1 (2011): 9-18. http://simplelink.library.utoronto.ca/url.cfm/460097

Kay, Adrian. "Tense layering and synthetic policy paradigms: The politics of health insurance in Australia." *Australian Journal of Political Science* 42.4 (2007): 579-591. http://simplelink.library.utoronto.ca/url.cfm/460098

6. Professions, Professionalism

Recommended

Freidson, Eliot. "The reorganization of the medical profession." *Medical Care Research and Review*, 42.1 (1985): 11-35.

Evetts, Julia. "New professionalism and new public management: Changes, continuities and consequences." *Comparative Sociology*, 8.2 (2009): 247-266.

Additional

Evetts J. 2006. Introduction. Trust and professionalism: Challenges and occupational changes. *Current Sociology*, 54(4): 515-531.

Light DW. 2004. Introduction. Ironies of success: A new history of the American health care 'system.' *Journal of Health and Social Behavior*, 45(Extra Issue): 1-24.

Ham C, Alberti KGMM. 2002. The medical profession, the public, and the government. *BMJ*, 324: 838-42.

McKinlay, John B., and Lisa D. Marceau. "The end of the golden age of doctoring." *International Journal of Health Services*, 32.2 (2002): 379-416.

Immergut EM. 1990. Institutions, veto points, and policy results: A comparative analysis of health care. *Journal of Public Policy*, 10(4): 391-416.

Harrison S, Ahmad WIU. 2000. Medical autonomy and the UK state 1975 to 2025. *Sociology*, 34(1): 129-146.

7. Performance & Accountability

Freeman, T. (2002). Using performance indicators to improve health care quality in the public sector: A review of the literature, *Health Services Management Research*, 15(2): 126-137. Available: http://simplelink.library.utoronto.ca/url.cfm/459979

Bevan, G. and C. Hood. (2006). Health policy: Have targets improved performance in the English NHS? *British Medical Journal*, 332(7538): 419. Available: http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1370980/

Tuohy, Carolyn Hughes. "Agency, contract, and governance: shifting shapes of accountability in the health care arena." *Journal of Health Politics, Policy and Law*, 28.2-3 (2003): 195-216.

Maynard A, Bloor K. 2003. Trust and performance management in the medical marketplace. *Journal of the Royal Society of Medicine*, 96(Nov): 532-539.

Fenton, Laura, and Brian Salter. "Competition and compromise in negotiating the new governance of medical performance: the clinical governance and revalidation policies in the UK." *Health Economics, Policy and Law,* 4.3 (2009): 283-303.

Additional

Bevan, G. and D. Wilson (2013). *Does 'naming and shaming' work for schools and hospitals? Lessons from natural experiments following devolution in England and Wales, Public Money and Management*, 33(4): 245-252. Available: http://simplelink.library.utoronto.ca/url.cfm/459981

Dent, Mike. "Post-new public management in public sector hospitals? The UK, Germany and Italy." *Policy & Politics*, 33.4 (2005): 623-636.

Bevan, Gwyn (2010) Approaches and impacts of different systems of assessing hospital performance *Journal of comparative policy analysis*, 12 (1-2). 33-56. ISSN 1387-6988.

Bevan, Gwyn (2006) Setting targets for health care performance: lessons from a case study of the English NHS *National Institute economic review*, 197 (1). 67-79. ISSN 0027-9501.

Salter, Brian. "Governing UK medical performance: A struggle for policy dominance." *Health policy*, 82.3 (2007): 263-275.

Bevan, Gwyn and Hood, Christopher (2006) What's measured is what matters: targets and gaming in the English public health care system *Public administration*, 84 (3). 517-538.

Goldfinch, Shaun, and Joe Wallis. "Two myths of convergence in public management reform." *Public Administration* 88.4 (2010): 1099-1115. http://simplelink.library.utoronto.ca/url.cfm/460099

Osborne, Stephen P., and Kate McLaughlin. "The new public management in context." *New public management: Current trends and future prospects* (2002): 7-14. http://simplelink.library.utoronto.ca/url.cfm/460100

8. Comparative policy studies

Recommended

Marmor, Theodore R., R. Freeman, and K. Okma. 2005. "Comparative Perspectives and Policy Learning in the World of Health Care." *Journal of Comparative Policy Analysis: Research and Practice* 7 (4): 331–348.

Burau, Viola. 2012. "Transforming Health Policy and Services: Challenges for Comparative Research." *Current Sociology* 60 (4): 569–578.

Beckfield, Jason, Sigrun Olafsdottir, and Benjamin Sosnaud. 2013. "Healthcare Systems in Comparative Perspective: Classification, Convergence, Institutions, Inequalities, and Five Missed Turns." *Annual Review of Sociology* 39: 127-146.

Additional

Ehlke, Daniel. "The political abuse of international health system comparisons." *Journal of Health Services Research & Policy* 16.3 (2011): 187-189.

ISSUES IN HEALTH POLICY

The following section identifies reports and scholarship specific to Canada's health care 'system,' including its history, basic structure, and ongoing evolution. Material is organized into the following domains:

- Overview
- Comparative perspective
- Federalism and the social union
- Recommendations for reform
- Financing health care
- Legal dimensions of health policy
- Primary care reform
- Integrated care/ aging/ community based care
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NB. I have included a sample of sources below. These are, I believe, of continuing relevance, but evidence and literature relevant to most topical issues is constantly updated. Students may therefore wish to review current syllabi for HAD5010 and HAD5020

9. Overview of Canada's health care 'system'

Deber, R., Gamble, B., & Mah, C. (2010). Canada: Variations on a common theme. *Italian Journal of Public Health*, 7, 224-231.

Marchildon, G.P. 2013. *Canada: Health System Review*. Health Systems in Transition, Second Edition, Vol. 15(1) Copenhagen: WHO Regional Office for Europe on behalf of the European Observatory on Health Systems and Policies; Toronto: University of Toronto Press.

Making Medicare: the history of health care in Canada, 1914-2007.

10. In comparative perspective

Tuohy CH. 1999. Dynamics of a Changing Health Sphere: The United States, Britain, and Canada. *Health Affairs*, 18, 3: 114-134.

Maioni A. 1997. Parting at the Crossroads: The Development of Health Insurance in Canada and the United States, 1940-1965. *Comparative Politics*, 29(4): 411-431.

Hacker JS. 1998. The historical logic of national health insurance: Structure and sequence in the development of British, Canadian, and U.S. medical policy. *Studies in American Political Development*, 12:57-130.

11. Federalism and the social union

Choudhry S. 2000. Bill 11, The Canada Health Act and the Social Union: The need for institutions. *Osgoode Hall Law Journal*, 38(1): 39-76.

Cameron, D., & Simeon, R. (2002). Intergovernmental relations in Canada: The emergence of collaborative federalism. Publius: *The Journal of Federalism*, 32, 49-71.

Courchene, T. J. (2008). Reflections on the federal spending power: Practices, principles, perspectives. Institute for Research on Public Policy working paper series no. 2008.01, June.

Telford, H., Graefe, P., & Banting, K. (2008). Defining the Federal Government's role in social policy: The spending power and other instruments. Institute for Research on Public Policy paper, volume 9, no. 3, September.

Banting, Keith. (2008) "The three federalisms: Social policy and intergovernmental decision-making." *Canadian federalism: Performance, effectiveness, and legitimacy* 2.

Béland, Daniel, and André Lecours. "Federalism, Nationalism and Social Policy Decentralization in Canada and Belgium." *Regional and Federal Studies* 17.4 (2007): 405-419. Available: http://simplelink.library.utoronto.ca/url.cfm/461152

Dewing, Michael, William Robert Young, and Erin Tolley. *Municipalities, the Constitution, and the Canadian Federal System*. Parliamentary Information and Research Service, 2006. Available: http://www.parl.gc.ca/content/LOP/ResearchPublications/bp276-e.htm

12. Recommendations for Reform

Kirby MJL. The Standing Senate Committee on Social Affairs, Science and Technology. The Health of Canadians – The Federal Role. Final Report. Volume Six: Recommendations for Reform. (note, there are 6 volumes)

Romanow, R. J. (2002). Building on values: The future of health care in Canada. Final report, Commission on the Future of Health Care in Canada, November.

Time for Transformative Change A Review of the 2004 Health Accord. Standing Senate Committee on Social Affairs, Science and Technology. The Honourable Kelvin K. Ogilvie, Chair, The Honourable Art Eggleton, P.C., Deputy Chair, March 2012

<u>Don Drummond, Commission on the Reform of Ontario's Public Services, 2012. See</u> particularly Chapter 5, Community Care, Home Care and Long-Term Care, recommendations 5-74 to 5-77.

Health Canada. (2004). A 10 year plan to strengthen health care. September 16.

13. Financing health care

Evans, R. G. (2002). Raising the money: Options, consequences, and objectives for financing health care in Canada. Commission on the Future of Health Care in Canada, Discussion Paper No. 27, Ottawa, Ontario, October.

Raisa Deber. 2004. Delivering health care services: Public, not-for-profit, or private? In G.P. Marchildon, T McIntosh and PG Forest (eds.), The Fiscal Sustainability of Health Care in Canada: Romanow Papers, Volume 1, Toronto: University of Toronto Press, 198-233.

Tuohy, Carolyn Hughes, Colleen M. Flood, and Mark Stabile. "How does private finance affect public health care systems? Marshaling the evidence from OECD nations." *Journal of Health Politics, Policy and Law* 29.3 (2004): 359-396.

Deber, R., & Lam, C. K. (2011). Medical savings accounts in financing healthcare. CHSRF Series of Reports on Financing Models: Paper 3, Ottawa, Ontario, May.

14. Legal dimensions of health policy

Flood C, Archibald T. 2001. The illegality of private health care in Canada. CMAJ. 164(6): 825-830.

Flood CM. Just Medicare: the role of Canadian courts in determining health care rights and access. J Law Med Ethics. 2005; Winter. 33(4):669-80.

Flood, Colleen M. "Chaoulli's legacy for the future of Canadian health care policy." *Osgoode Hall LJ* 44 (2006): 273.

15. Primary care reform

Kates, N., Hutchison, B., O'Brien, P., Fraser, B., Wheeler, S., & Chapman, C. (2012). Framework for advancing improvement in primary care. *HealthcarePapers*, 12(2), 8.

Duckett, Stephen. "Frameworks and primary healthcare policy." *HealthcarePapers*, 12.2 (2012): 29.

Hutchison, B., Levesque, J. F., Strumpf, E., & Coyle, N. (2011). Primary health care in Canada: systems in motion. *Milbank Quarterly*, 89(2), 256-288.

Starfield, B. (2008). Primary care in Canada: Coming or going? *HealthcarePapers*, 8(2), 58-62.

Brian Hutchison, Julia Abelson, and John Lavis. 2001. Primary Care In Canada: So Much Innovation, So Little Change. *Health Affairs*, 20(3): 116-131.

Hutchison, B. (2008). A long time coming: Primary healthcare renewal in Canada. *HealthcarePapers*, 8(2), 10-24.

Glazier, R. H., & Redelmeier, D. A. (2010, June 2). Building the patient-centered medical home in Ontario. Journal of the American Medical Association, 303(21), 2186-2187.

Starfield, Barbara, Leiyu Shi, and James Macinko. "Contribution of primary care to health systems and health." *Milbank quarterly* 83.3 (2005): 457-502.

Hutchison, Brian, and Richard Glazier. "Ontario's primary care reforms have transformed the local care landscape, but a plan is needed for ongoing improvement." *Health Affairs* 32.4 (2013): 695-703.

16. Integrated care/ aging/ community based care

Bevan, Gwyn and Janus, Katharina (2011) Why hasn't integrated health care developed widely in the United States and not at all in England? *Journal of health politics, policy and law*, 36 (1). 141-164.

Lewis, Steven, and Denise Kouri. "Regionalization: making sense of the Canadian experience." *HealthcarePapers*, 5.1 (2004): 12.

Williams A P, Challis D., Deber R, Watkins J, Kuluski K, Lum, J, & Daub, S. (2009). Balancing institutional and community-based care: why some older persons can age successfully at home why others require residential long-term care. *Healthcare Quarterly*, 12(2), 95-104.

Boychuk T. After medicare: regionalization and Canadian health care reform. *CBMH*, vol. 26:2 2009: 353-378.

Heckman GA. Integrated care for the frail elderly. *HealthcarePapers*, 11 (1) 2011: 62-68.

Pasini P. Making a reality of social and health care integration: lessons from the Italian peninsula. International Journal of Integrated Care, vol. 11, 30 Sept. 2011: 1-2.

Williams, A. P., Lum, J. M., Deber, R., Montgomery, R., Kuluski, K., Peckham, A., Watkins, J., Williams, A., Ying, A., & Zhu, L. Aging at Home: Integrating Community-Based Care for Older Persons. *HealthcarePapers*, vol. 10, no. 1, 2009.

Valentijn, P.P., et al., Understanding integrated care: a comprehensive conceptual framework based on the integrative functions of primary care. Int J Integr Care, 2013. 13: p. e010.

Kodner, D.L. and C. Spreeuwenberg, Integrated care: meaning, logic, applications, and implications--a discussion paper. Int J Integr Care, 2002. 2: p. e12.

17. Drug access policy

Romanow, RJ. Building on Values: The Future of Health Care in Canada. Commission on the Future of Health Care in Canada. Final Report, November 2002. Accessed on-line, December 2013 at http://dsp-psd.pwgsc.gc.ca/Collection/CP32-85-2002E.pdf

• Chapter 9: Prescription Drugs

Canadian Institute for Health Information (CIHI). Drivers of Prescription Drug Spending in Canada. Accessed on-line, December 2013 at http://www.cihi.ca/CIHI-ext-portal/pdf/internet/DRUG SPEND DRIVERS EN

CIHI. Seniors and prescription drug use. Series on Seniors. December 2010. Accessed on-line, December 2013 at http://www.cihi.ca/CIHI-ext-portal/pdf/internet/SENIORS DRUG INFO EN

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