



Updated July 28, 2022 – Readings and Assignments Subject to Change

JSGS 817 – Health Policy

	UNIVERSITY OF SASKATCHEWAN CAMPUS	UNIVERSITY OF REGINA CAMPUS
INSTRUCTOR:	Not applicable	Cheryl A. Camillo, Ph.D.
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OFFICE HOURS:		By appointment.
OFFICE LOCATION:		CB 334.5 or https://zoom.us/j/510802147
TERM:		Fall 2022
ROOM:		Online (via UR Courses and Zoom)
DATE AND TIME:		This course will begin on Wednesday, August 31, 2022. It will consist of 13 modules, each of which will run from 8:00 a.m. SK time on Wednesday until 11:59 p.m. SK time the following Tuesday. Most activities will take place online, although there will be live webinars that students can participate in via Zoom. See below for more details.

LAND ACKNOWLEDGEMENT

The University of Saskatchewan campus of the Johnson Shoyama Graduate School of Public Policy is situated on Treaty 6 Territory and the Homeland of the Métis, while the University of Regina (U of R) campus is situated on Treaty 4 Territory and the Homeland of the Métis. We pay our respect to the First Nation and Métis ancestors of this place and reaffirm our relationship with one another. As we engage in Remote Teaching and Learning, we would also like to recognize that some may be attending this course from other traditional Indigenous lands. I ask that you take a moment to make your own Land Acknowledgement to the peoples of those lands. In doing so, we are actively participating in reconciliation as we navigate our time in this course, learning and supporting each other.

INTELLECTUAL PROPERTY ACKNOWLEDGEMENT

This course was developed by Cheryl Camillo.

HONOUR CODE

At the Johnson Shoyama Graduate School of Public Policy (JSGS), we believe honesty and integrity are fundamental in a community dedicated to learning, personal development, and a search for understanding. We revere these values and hold them essential in promoting personal responsibility, moral and intellectual leadership, and pride in ourselves and our University.

As JSGS students, we will represent ourselves truthfully, claim only work that is our own, and engage honestly in all academic assignments.

Since articulated standards and expectations can influence attitudes, and because each of us shares the responsibility for maintaining academic integrity (see below for details on academic integrity at the JSGS), we are committed to upholding the Academic Honor Code.

Academic Honour Pledge

As a member of the JSGS community, I pledge to live by and to support the letter and spirit of JSGS's Academic Honour Code.

REMOTE LEARNING CONTEXT

We acknowledge the complex circumstances – that is, a worldwide pandemic – in which this course is taking place. Since remote teaching and learning context may be new to some, all participations should interact with empathy, patience and care. Links to online learning resources are provided below.

CALENDAR DESCRIPTION

This course will review the development and structure of the Canadian health care system, including its supporting principles, history, governance, and fiscal arrangements. Issues such as benefit coverage, inequalities, pharmaceuticals, health human resources, and health reform in a comparative context will be examined.

LEARNING OBJECTIVES

Following successful completion of this course, students should be able to:

- ❖ Describe the Canadian health care system, including how it compares to others,
- ❖ Understand and critique health policies, ranging from high-level policies intended to reform the system to practice-level policies, and
- ❖ Formulate policy alternatives for health care organizations and multiple levels of government and defend them to decision-makers and stakeholders.

MHA PROGRAM COMPETENCIES

1. **Health Services and Health Status** - Ability to analyze health services and other factors that impact health status and demonstrate a commitment to improving the health status of individuals, families, and communities.
2. **Management, Governance, and Leadership** - Ability to inspire support for a vision or course of action and successfully direct the teams, processes, and changes required to accomplish it.
3. **Communication and Interpersonal Skills** - Ability to communicate effectively and build enduring, trust-based professional relationships.
4. **Systems Thinking and Creative Analysis** - Ability to identify key issues and problems, analyze them systematically, and reach sound, innovative conclusions.
5. **Public Policy and Community Engagement** - Ability to understand how organizational and public policies are formulated, their impact on healthcare organizations and communities, and how to influence their development.
6. **Continuous Evaluation and Improvement** - Commitment to on-going evaluation for continuous organizational and personal improvement

COURSE CONTENT AND APPROACH

This course provides an overview of key aspects of Canadian health policy, including: the health policy process; health system design; health care financing; health politics; indigenous health; public health; population health; the health workforce; health profession regulation; health care delivery; health services; experiences of care; health system redesign; health technology and innovation, and health inequalities. While some subjects might overlap with those in other JSGS courses, the emphasis is on health policy, not organization or administration.

The course will be divided into 13 weekly modules, each of which will run from 8:00 a.m. Saskatchewan (SK) time on Wednesday until 11:59 p.m. SK time the following Tuesday (with an exception for fall break as detailed below). Each module will focus on a particular topic described in more detail below.

This is an online course that will be conducted mainly via “UR Courses,” the University of Regina’s Online Learning Environment. However, most modules will include an hour-long webinar, conducted using the Zoom meeting platform, to be held, for the most part, on Mondays (subject to change) in a time slot selected by students from a few options at the beginning of the term. On one or two occasions, webinars might be held on another night of the week due to scheduling conflicts. Webinar lectures could include material not covered in the required or supplementary readings. A guest lecturer may deliver one or two webinars. Students are not required to attend the synchronous sessions, but would likely to benefit from doing so. As described below, webinars will be recorded and made available to students for the remainder of the semester.

COURSE OUTLINE AND READINGS

Each module has required readings and UR Courses activities, and some have supplementary readings. Supplementary readings are optional; they will provide additional information and might be useful for professional purposes. I recommend that you do the readings in the order listed below. Please note that I have included readings representing as many types (for example, peer-reviewed journal articles, government reports, commentaries, etc.) and perspectives as possible in order to provide exposure to the broad range of health policy documents and views. Also note that I might assign additional readings during the semester.

Each assignment is designed to build health policy skills and accomplish the three course objectives. To support successful completion, assignment due dates are spread out throughout the semester.

Module 1 – Orientation/Introduction to Health Policy (August 31 - September 6, 2022)

This first module will facilitate group introductions and include an overview of the course structure, content, expectations, assignments and methods of evaluation. It will also present an opportunity for students to become familiar with navigating and using the features of UR Courses and Zoom webinar software. Finally, it will introduce students to health policy definitions, concepts, analysis, and research.

REQUIRED READINGS

Health Care in Canada: pp. ix-xiv (Preface).

Case Studies: pp. xiii-xvi (Introduction); 1-2 (Chapter 1, Section 1).

Camillo, C. A. 2017. *Comparative health policies*. Springer International Publishing: Global Encyclopedia of Public Administration, Public Policy, and Governance. doi:10.1007/978-3-319-31816-5_3127-1

Module 2 – Policymaking Process/Health Stakeholders (September 7-13, 2022)

This module will examine how policy is made. We will identify Canada's key health stakeholders and discuss how they influence the policymaking process.

REQUIRED READINGS

Case Studies: pp. 15-29 (Chapter 1, Section 3); 29-45 (Chapter 1, Sections 4 + 5).

International Council of Nurses. 2005. *Guidelines on shaping effective health policy*. Geneva (Switzerland): ICN - International Council of Nurses.

Lomas, J., and A.D. Brown. 2009. "Research and advice giving: A functional view of evidence-informed policy advice in a Canadian Ministry of Health." *Milbank Quarterly* 87(4): 903-926.

Leviton, L.C. and L. Melichar. 2016. "Balancing stakeholder needs in the evaluation of healthcare quality improvement." *BMJ Quality and Safety* 25: 803-807.

Module 3 – Health System Design/International Health Systems (September 14-20, 2022)

In this module we will review the main models for financing (with public and/or private funds) and delivering health care to populations, particularly in federal states. We will also review the main considerations, such as equity, that influence decision-making about these models. Finally, we will study the structure, function and outcomes of other nations' health systems and discuss how comparing health systems contributes to policy formulation.

REQUIRED READINGS

Case Studies: pp. 45-50 (Sections 6.1 – 6.2); 56-60 (Section 7.1).

Health Care in Canada: pp. 3-20 (Chapter 1 up to "The Canada Health Act").

Bohm, K., Schmid, A., Gotze, R., Landwehr, C., and H. Rothgang. 2013. "Five types of OECD healthcare systems: Empirical results of a deductive classification." *Health Policy* 113(2013): 258-269.

The Commonwealth Fund. 2020. *International Profiles of Health Care Systems*. Accessed August 11, 2020. <https://www.commonwealthfund.org/international-health-policy-center/system-profiles> (Review the profiles of Canada and one other country of your choice).

SUPPLEMENTARY READINGS

Health Care in Canada: pp. 219-241 (Chapter 9); 242-266 (Chapter 10).

Module 4 – Jurisdiction over Health/The Canada Health Act/ Federal and Provincial Programs (September 21-27, 2022)

This module will start by outlining the constitutional division of powers and sources of federal, provincial, and First Nations' jurisdiction over health. We will proceed by reviewing the Canada Health Act (CHA), its history, purpose, principles and enforcement and how it shapes the structure and provision of health services in Canada. In doing so, we will review Canada's federal and provincial health programs.

REQUIRED READINGS

Begin, M. 2018. "The Canada Health Act (1984)." In *Ladies, Upstairs! My Life in Politics and After*, 1-32. Montreal: McGill-Queen's University Press.

Leeson, H. 2004. "Constitutional Jurisdiction over health and health services in Canada." In *The Governance of Health Care in Canada; The Romanow Papers, Vol. 3*, edited by T. McIntosh, P-G. Forest,

and G.P. Marchildon. 50-82. Accessed August 26, 2019.
<http://publications.gc.ca/collections/Collection/CP32-79-12-2002E.pdf>.

Flood, C., and S. Choudry. 2004. "Strengthening the foundations: Modernizing the Canada Health Act." In *The Governance of Health Care in Canada; The Romanow Papers*, Vol. 3, edited by T. McIntosh, P-G. Forest, and G.P. Marchildon. 346-387. Toronto: University of Toronto Press. Accessed August 26, 2019. https://qspace.library.queensu.ca/bitstream/1974/6884/28/discussion_paper_13_e.pdf: pp. iii-24, 29-37.

Marchildon, G., and B. Tholl. 2017. "Addressing Ten Unhelpful Myths about the *Canada Health Act* and Why it Matters." *Health Law in Canada* 37 (2&3): 32-44.

Module 5 – Insured Services/Non-Insured/Extended Services (September 28 - October 4, 2022)

This module will review the medically necessary services covered under the Canada Health Act and consider the gaps in coverage, such as of long-term care and prescription drugs, and inequities in access across sociodemographic groups and their implications.

REQUIRED READINGS

Emery, J.C., and R. Kneebone. 2013. "The Challenge of Defining Medicare Coverage in Canada." *The School of Public Policy, SRP Research Papers*. Volume 6, Issue 21, Accessed August 26, 2019. <https://www.policyschool.ca/wp-content/uploads/2016/03/emery-kneebone-medicare.pdf>

Locker, D., J. Maggiriias, and C. Quinonez. 2011. "Income, dental insurance coverage, and financial barriers to dental care among Canadian adults." *Journal of Public Health Dentistry* 71 (2011): 327-334.

Health Care in Canada: pp. 196-218 (Chapter 8).

Deber, R., and B. Gamble. 2007. "'What's in, what's out': stakeholder views about the boundaries of Medicare." *Longwoods Review* 2 (3): 1-10.

Florizone, D. 2020. "Long-term care in the era of COVID-19: There is no place like home." Accessed August 12, 2020. <https://www.schoolofpublicpolicy.sk.ca/research/publications/policy-brief/long-term-care-in-the-era-of-covid-19.php>.

SUPPLEMENTARY READINGS

Advisory Council on the Implementation of National Pharmacare. 2019. "Executive Summary." In *A Prescription for Canada: Achieving Pharmacare for All*. Accessed August 12, 2020. <https://www.canada.ca/en/health-canada/corporate/about-health-canada/public-engagement/external-advisory-bodies/implementation-national-pharmacare/final-report.html#summ>.

Module 6 – Public Health Policy (October 5-11, 2022)

Note: No live webinar due to Thanksgiving holiday

This module will provide an introduction to public health policy. We will discuss the essential definitions and core values of public health, consider the key tools in public health law, review public health structures in Canada and identify some of the fundamental tensions in this field as Canada responds to the COVID-19 pandemic.

REQUIRED READINGS

Ries, N. 2005. "Legal foundations of public health in Canada." In *Public Health Law & Policy in Canada*, edited by T. Bailey, T. Caulfield, and N. Ries, 7-37. Ontario: LexisNexis Butterworths.

Case Studies: pp. 50-55 (Section 6.3); 67-73 (Sections 8.2-8.3).

Health Care in Canada: pp. 104-131 (Chapter 5).

Wilson, K., and H. Lazar. 2005. "Planning for the Next Pandemic Threat: Defining the Federal Role in Public Health Emergencies." *IRPP Policy Matters* vol. 6, no. 5. Accessed August 26, 2019. <http://irpp.org/research-studies/policy-matters-vol6-no5/>.

King, M., A. Maltsev, V. Haldane, S. Allin, G. Marchildon, M. Roerig, and C. Camillo. 2020. "North American COVID-19 Policy Response Monitor: Saskatchewan." Toronto, ON: North American Observatory on Health Systems and Policies. Accessed August 11, 2020. https://ihpme.utoronto.ca/wp-content/uploads/2020/07/SK-COVID19-Response-Monitor_20200626.pdf. [Note: this reading might be replaced by other COVID-19 related reading(s) after the start of the semester.]

CIHR Institute of Population and Public Health. 2021. *Building Public Health Systems for the Future*. Accessed December 21, 2021. <https://cihr-irsc.gc.ca/e/documents/building-public-health-systems-for-the-future-en.pdf>

Module 7 – Population Health (October 12-18, 2022)

This module will provide an introduction to population health policy. We will also define the concept and consider how implementation of it can impact the organization and delivery of care and, ultimately, health.

REQUIRED READINGS

Public Health Agency of Canada. 2013. *Population Health Approach: The Organizing Framework*. Accessed August 26, 2019. <https://cbpp-pcpe.phac-aspc.gc.ca/population-health-approach-organizing-framework/> (review the web site).

Frohlich, K., and L. Potvin. 2008. "The Inequity paradox: The population approach and vulnerable populations." *American Journal of Public Health* 98(2): 216-221.

Bryant, T., and D. Raphael. 2020. "Chapter 3, The Canadian Welfare State and the Health of Canadians." In *The Politics of Health in the Canadian Welfare State*. Toronto: Canadian Scholars Press.

Raphael, D., and T. Bryant. 2006. "The state's role in promoting population health: Public health concerns in Canada, USA, UK and Sweden." *Health Policy* 78: 39-55.

Module 8 – Indigenous Health (October 19-25, 2022)

In this module, we will explore an area of emphasis at the University of Regina—indigenous health. Specifically, we will examine indigenous communities' efforts to work with Canadian governments to improve health services to indigenous people, who as a group experience inequitable health outcomes.

REQUIRED READINGS

Fournier, B., K. E. Kushner, and K. Raine. 2019. "‘To Me, Policy Is Government’: Creating a Locally Driven Healthy Food Environment in the Canadian Arctic." *Health & Place* 58 (July): 102138.

Gallagher, J. 2019. "Indigenous approaches to health and wellness leadership." *Healthcare Management Forum* 32(1): 5-10.

Lavoie, J. G. 2018. "Medicare and the Care of First Nations, Métis and Inuit." *Health Economics, Policy, and Law* 13 (3-4): 280–98.

Indigenous Services Canada. 2020. *Non-insured health benefits for First Nations and Inuit*. Accessed August 9, 2021. <https://www.sac-isc.gc.ca/eng/1572537161086/1572537234517>

Assembly of First Nations. 2021. *What is Jordan's Principle?* Accessed August 9, 2021. <https://www.afn.ca/policy-sectors/social-secretariat/jordans-principle/>

Achan, G. K., R. Eni, K. A. Kinew, W. Phillips-Back, J. G. Lavoie, and A. Katz. 2021. "The Two Great Healing Traditions: Issues, Opportunities, and Recommendations for an Integrated First Nations Healthcare System in Canada." *Health Systems & Reform* 7:1, e1943814, DOI: 10.1080/23288604.2021.1943814

Module 9 – Health Workforce/Regulating Health (October 26-November 1, 2022)

This module will examine the scopes of practice of health professions in Canada and relevant models and forms of regulation, including self-regulation. It will also delve into the recruitment, training, and continuing education of health professionals.

REQUIRED READINGS

Health Care in Canada: pp. 132-150 (Chapter 6).

Case Studies: pp. 73-76 (Sections 8.4 – 9.1).

Baranek, P. 2005. A Review of Scopes of Practice of Health Professions in Canada: A Balancing Act. Toronto: Health Council of Canada. Accessed August 26, 2019.
http://publications.gc.ca/collections/collection_2007/hcc-ccs/H174-8-2005E.pdf.

Wranik, D. 2008. "Health human resource planning in Canada: a typology and its application." *Health Policy* 86(1): 27-41.

Epps, T. 2011. "Regulation of health care professionals." *Canadian health law and policy*. (4th ed.), edited by: J. Downie, T. Caulfield, & C. M. Flood, 75-114. Markham, ON: LexisNexis Canada.

Bourgeault, I.L. 2021. "The pandemic exposes critical gaps in our health workforce planning." Accessed December 21, 2021. <https://quoimedia.com/the-pandemic-exposes-critical-gaps-in-our-health-workforce-planning/>

SUPPLEMENTARY READINGS

Case Studies: 206-220 (Chapter 8); 231-259 (Chapter 10).

Module 10 – Health Care Delivery/Experiences (November 2-15, 2022)

Remembrance Day: November 11, 2022

Fall Reading Week: November 7-12, 2022

Note: Healthy Debate Submission due on November 4.

In this module we will discuss the roles, responsibilities and experiences of key players in health care delivery in Canada, including health professionals, patients and families.

REQUIRED READINGS

Tyssen R., K. Palmer, I. Solberg, E. Voltmer, and E. Frank. 2013. "Physician perceptions of quality of care, professional autonomy, and job satisfaction in Canada, Norway, and the United States." *BMC Health Services Research* 13(516). Accessed August 26, 2019.
<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3904199/pdf/1472-6963-13-516.pdf>.

Canadian Institutes of Health Research. *Strategy for Patient-Oriented Research: Putting Patients First*. 2014. Accessed August 12, 2020. https://cihr-irsc.gc.ca/e/documents/spor_framework-en.pdf.

Saini, V., Garcia-Armesto, S., Klemperer, D., Elshaug, A.G., Brownlee, S., Ioannidis, J. P. A., and E.S. Fisher. 2017. "Drivers of poor medical care." *Lancet* 13(516): 1-13. Accessed August 26, 2019.
[http://dx.doi.org/10.1016/S0140-6736\(16\)30947-3](http://dx.doi.org/10.1016/S0140-6736(16)30947-3).

Zikhani, R. 2016. "Seven-step pathway for preventing errors in healthcare." *Journal of Healthcare Management* 61(4): 271-281.

Module 11 – Reforming the Health System, Delivery and Payment (November 16-22, 2022)

In this module we will examine health care reform initiatives, with a focus on organizational, delivery, and payment reform. We will discuss Canadian reforms, as well as examples of reforms from other countries with lessons or implications for Canada's health system.

REQUIRED READINGS

Fierlbeck, K. 2016. "The politics of regionalization." *Healthcare Papers* 16(2): 58-62.

Rudoler, D., A. Peckham, A. Grudniewicz, and G. Marchildon. 2019. "Coordinating primary care services: A case of policy layering." *Health Policy* 123(2): 215-221.

Devlin, R.A., S. Sarma, and W. Hogg. 2006. "Remunerating primary care physicians: emerging directions and policy options for Canada." *Healthcare Quarterly* 9(3): 34-42.

Case Studies: pp. 312-328 (Chapter 13).

Module 12 – Health Technology/Innovation in Health (November 23-29, 2022)

In this module we will cover innovations in biomedicine and information technology and consider their implications for researchers, policy makers and the public.

REQUIRED READINGS

Alami, H., M-P. Gagnon, and J.-P Fortin. 2017. "Digital health and the challenge of health systems transformation." *mHealth* 3(31): 1-5.

Canada Health Infoway. 2016. *Digital Health Blueprint: Enabling Coordinated and Collaborative Health Care*. Accessed August 23, 2019. <https://www.infoway-inforoute.ca/en/component/edocman/2944-digital-health-blueprint-enabling-coordinated-collaborative-health-care/view-document?Itemid=0> (review the report).

McCabe, C., and D. Husereau. 2014. *Personalized Medicine and Health Care Policy: From Science to Value*. Ottawa, ON: Genome Canada.

SUPPLEMENTARY READINGS

Case Studies: pp. 329-345 (Chapter 14); 488-510 (Chapter 23).

Module 13 – Course Wrap-Up (November 30 - December 6, 2022)

Note: Health Reform Observer Submission due on December 6.

In this module, we will review the themes identified during the course and consider the future of Canadian health policy.

REQUIRED READINGS

Health Care in Canada: pp. 299-319 (Chapter 12).

REQUIRED READINGS

The required texts, which will be available for purchase through the University of Regina Bookstore (<http://www.uregina.ca/student/bookstore/textbooks/index.html>), are:

- ❖ Fierlbeck, Katherine. 2011. *Health Care in Canada: A Citizen's Guide to Policy and Politics*. Toronto: University of Toronto Press.

Hereafter referred to as *Health Care in Canada*.

- ❖ Deber, Raisa, with Catherine L. Mah, eds. 2014. *Case Studies in Canadian Health Policy and Management*. Second Edition. Toronto: University of Toronto Press.

Hereafter referred to as *Case Studies*.

Additional required readings are below. All will be available online, either through UR Courses, the University of Regina library (<https://www.uregina.ca/library/>) or open access sources.



Alami, H., M-P. Gagnon, and J.-P. Fortin. 2017. "Digital health and the challenge of health systems transformation." *mHealth* 3(31): 1-5.

Assembly of First Nations. 2019. *What is Jordan's Principle?* Accessed August 26, 2019. <https://www.afn.ca/policy-sectors/social-secretariat/jordans-principle/>.

Baranek, P. 2005. A Review of Scopes of Practice of Health Professions in Canada: A Balancing Act. Toronto: Health Council of Canada. Accessed August 26, 2019. http://publications.gc.ca/collections/collection_2007/hcc-ccs/H174-8-2005E.pdf.

Begin, Monique. 2018. "The Canada Health Act (1984)." in *Ladies, Upstairs! My Life in Politics and After*, 1-32. Montreal: McGill-Queen's University Press.

Bohm, K., Schmid, A., Gotze, R., Landwehr, C., and H. Rothgang. 2013. "Five types of OECD healthcare systems: Empirical results of a deductive classification." *Health Policy* 113(2013): 258-269.

Bourgeault, I.L. 2021. "The pandemic exposes critical gaps in our health workforce planning." Accessed December 21, 2021. <https://quoimedia.com/the-pandemic-exposes-critical-gaps-in-our-health-workforce-planning/>

Bryant, T., and D. Raphael. 2020. "Chapter 3, The Canadian Welfare State and the Health of Canadians." In *The Politics of Health in the Canadian Welfare State*. Toronto: Canadian Scholars Press.

Camillo, C. A. 2017. *Comparative health policies*. Springer International Publishing: Global Encyclopedia of Public Administration, Public Policy, and Governance.

Canadian Institutes of Health Research. *Strategy for Patient-Oriented Research: Putting Patients First*. 2014. Accessed August 12, 2020. https://cihr-irsc.gc.ca/e/documents/spor_framework-en.pdf

CIHR Institute of Population and Public Health. 2021. *Building Public Health Systems for the Future*. Accessed December 21, 2021. <https://cihr-irsc.gc.ca/e/documents/building-public-health-systems-for-the-future-en.pdf>

Deber, R., and B. Gamble. 2007. "'What's in, what's out': stakeholder views about the boundaries of Medicare." *Longwoods Review* 2 (3): 1-10.

Deber, Raisa, with Catherine L. Mah, eds. 2014. *Case Studies in Canadian Health Policy and Management*. Second Edition. Toronto: University of Toronto Press. Hereafter referred to as *Case Studies*.

Devlin, R.A., S. Sarma, and W. Hogg. 2006. "Remunerating primary care physicians: emerging directions and policy options for Canada." *Healthcare Quarterly* 9(3): 34-42.

Emery, J.C., and R. Kneebone. 2013. "The Challenge of Defining Medicare Coverage in Canada." The School of Public Policy, SRP Research Papers. Volume 6, Issue 21, Available at: <http://www.policyschool.ucalgary.ca/sites/default/files/research/emery-kneebone-medicare.pdf>.

Epps, T. 2011. "Regulation of health care professionals." *Canadian health law and policy*. (4th ed.), edited by: J. Downie, T. Caulfield, & C. M. Flood, 75-114. Markham, ON: LexisNexis Canada.

Fierlbeck, K. 2016. "The Politics of Regionalization." *Healthcare Papers* 16(2): 58-62.

Flood, C., and S. Choudry. 2004. "Strengthening the foundations: Modernizing the Canada Health Act." In *The Governance of Health Care in Canada; The Romanow Papers*, Vol. 3, edited by T. McIntosh, P-G. Forest, and G.P. Marchildon. 346-387. Toronto: University of Toronto Press. Accessed August 26, 2019. https://qspace.library.queensu.ca/bitstream/1974/6884/28/discussion_paper_13_e.pdf: pp. iii-24, 29-37.

Florizone, D. 2020. "Long-term care in the era of COVID-19: There is no place like home." Accessed August 12, 2020. <https://www.schoolofpublicpolicy.sk.ca/research/publications/policy-brief/long-term-care-in-the-era-of-covid-19.php>.

Frohlich, K., and L. Potvin. 2008. "The Inequity paradox: The population approach and vulnerable populations." *American Journal of Public Health* 98(2): 216-221.

Gallagher, J. 2019. "Indigenous approaches to health and wellness leadership." *Healthcare Management Forum* 32(1): 5-10.

Health Canada. 2019. *Non-insured health benefits for First Nations and Inuit*. Accessed August 26, 2019. <http://healthycanadians.gc.ca/health-system-systeme-sante/services/non-insured-health-benefits-services-sante-non-assures/index-eng.php>.

International Council of Nurses. 2005. *Guidelines on shaping effective health policy*. Geneva (Switzerland): ICN - International Council of Nurses.

King, M., A. Maltsev, V. Haldane, S. Allin, G. Marchildon, M. Roerig, and C. Camillo. 2020. "North American COVID-19 Policy Response Monitor: Saskatchewan." Toronto, ON: North American Observatory on Health Systems and Policies. Accessed August 11, 2020. https://ihpme.utoronto.ca/wp-content/uploads/2020/07/SK-COVID19-Response-Monitor_20200626.pdf.

Leeson, H. 2004. "Constitutional Jurisdiction over health and health services in Canada." In *The Governance of Health Care in Canada; The Romanow Papers, Vol. 3*, edited by T. McIntosh, P-G. Forest, and G.P. Marchildon. 50-82. Accessed August 26, 2019. <http://publications.gc.ca/collections/Collection/CP32-79-12-2002E.pdf>.

Leviton, L.C. and L. Melichar. 2016. "Balancing stakeholder needs in the evaluation of healthcare quality improvement." *BMJ Quality and Safety* 25: 803-807.

Locker, D., J. Maggrias, and C. Quinonez. 2011. "Income, dental insurance coverage, and financial barriers to dental care among Canadian adults." *Journal of Public Health Dentistry* 71 (2011): 327-334.

Lomas, J., and A.D. Brown. 2009. "Research and advice giving: A functional view of evidence-informed policy advice in a Canadian Ministry of Health." *Milbank Quarterly* 87(4): 903-926.

Marchildon, G., and B. Tholl. 2007. "Addressing Ten Unhelpful Myths about the *Canada Health Act* and Why it Matters." *Health Law in Canada* 37 (2%3): 32-44.

McCabe, C., and D. Husereau. 2014. *Personalized Medicine and Health Care Policy: From Science to Value*. Ottawa, ON: Genome Canada.

Public Health Agency of Canada. 2013. *Population Health Approach: The Organizing Framework*. Accessed August 26, 2019. <https://cbpp-pcpe.phac-aspc.gc.ca/population-health-approach-organizing-framework/> (review the web site).

Raphael, D., and T. Bryant. 2006. "The state's role in promoting population health: Public health concerns in Canada, USA, UK and Sweden." *Health Policy* 78: 39-55.

Ries, N. 2005. "Legal foundations of public health in Canada." In *Public Health Law & Policy in Canada*, edited by T. Bailey, T. Caulfield, and N. Ries, 7-37. Ontario: LexisNexis Butterworths.

Rudoler, D., A. Peckham, A. Grudniewicz, and G. Marchildon. 2019. "Coordinating primary care services: A case of policy layering." *Health Policy* 123(2): 215-221.

Saini, V., Garcia-Armesto, S., Klemperer, D., Elshaug, A.G., Brownlee, S., Ioannidis, J. P. A., and E.S. Fisher. 2017. "Drivers of poor medical care." *Lancet* 13(516): 1-13. Available at: [http://dx.doi.org/10.1016/S0140-6736\(16\)30947-3](http://dx.doi.org/10.1016/S0140-6736(16)30947-3).

The Commonwealth Fund. 2020. *International Profiles of Health Care Systems*. Accessed August 11, 2020. <https://www.commonwealthfund.org/international-health-policy-center/system-profiles>.

Tyssen R., K. Palmer, I. Solberg, E. Voltmer, and E. Frank. 2013. "Physician perceptions of quality of care, professional autonomy, and job satisfaction in Canada, Norway, and the United States." *BMC Health Services Research* 13(516). Available at: <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3904199/pdf/1472-6963-13-516.pdf>.

Wilson, K., and H. Lazar. 2005. "Planning for the Next Pandemic Threat: Defining the Federal Role in Public Health Emergencies." IRPP Policy Matters vol. 6, no. 5. Available online from IRPP Publications: <http://irpp.org/research-studies/policy-matters-vol6-no5/>.

Wranik, D. 2008. "Health human resource planning in Canada: a typology and its application." *Health Policy* 86(1): 27-41.

Zikhani, R. 2016. "Seven-step pathway for preventing errors in healthcare." *Journal of Healthcare Management* 61(4): 271-281.

SUPPLEMENTARY READINGS

Supplemental (optional) readings are below. All will be available online, either through UR Courses, the University of Regina library (<https://www.uregina.ca/library/>) or open access sources.



Advisory Council on the Implementation of National Pharmacare. 2019. "Executive Summary." In *A Prescription for Canada: Achieving Pharmacare for All*. Accessed August 12, 2020. <https://www.canada.ca/en/health-canada/corporate/about-health-canada/public-engagement/external-advisory-bodies/implementation-national-pharmacare/final-report.html#summ>.

Deber, Raisa, with Catherine L. Mah, eds. 2014. *Case Studies in Canadian Health Policy and Management*. Second Edition. Toronto: University of Toronto Press. Hereafter referred to as *Case Studies*.

DESCRIPTION OF ASSIGNMENTS

MODULE-SPECIFIC DISCUSSION FORUM ENGAGEMENT (15%): To formulate good health policy, one must be able to identify and understand the many dimensions of policy problems. There are many ways one can identify policy problems, including by listening to colleagues and accessing various health policy resources. Policy understanding often comes through discussion and debate. During Modules 3– 13, the teaching assistant or one or more student moderators will lead online (UR Courses) "Module-Specific" forums on the module topics/readings. Students are expected to participate by responding to and initiating posts (using no more than 200 words in a single post). Regular posting is encouraged, but

substantive posts, especially ones that draw from current health policy news, will be more highly rewarded. Additional details regarding this assignment can be found in the marking guide provided to students.

MODERATION ACTIVITY (20%): Information synthesis and discussion moderation are essential to the formulation and adoption of good policies. Therefore, each student will be required to moderate or co-moderate a module. Each moderator will act as a topical “expert” for the week by preparing and posting introductions to the module topics/required readings, posing questions, and facilitating discussion on UR Courses. Afterwards, within one week of the close of the module, each moderator will analyze and summarize (in writing) the discussion. Moderation assignments will be made prior to or during the second week of class. Additional details regarding this assignment can be found in the marking guide provided to students.

UR COURSES ACTIVITIES (5%): To stimulate thinking about health system issues and to simulate policymaking, the instructor will post short exercises for students to UR Courses throughout the semester. Exercises might consist of responding to polls or surveys or posting responses to short questions. Students will be required to complete 5 activities worth 1% point each over the course of the semester. Additional details regarding this assignment can be found in the marking guide provided to students.

HEALTHY DEBATE (25%): You work in and/or are affected by the Canadian health system. You come to this class with insights/experiences/opinions that could lead to positive reforms if argued convincingly. Each student will write a well-researched policy commentary with a well-developed angle for healthydebate.ca, after which you have the choice to submit it for consideration for publication or not. Your debate submission will be due no later than Friday, November 4, 2022 at 11:59 p.m. SK time. Additional details regarding this assignment can be found in the marking guide provided to students.

HEALTH REFORM ANALYSIS (35%): Each student will write an in-depth analysis of the health policy issue of their choice. The purposes of this assignment are to foster health policy research and analysis skills and to help students draft publishable papers on timely and important topics. The analysis should be written in the style of Health Reform Observer (HRO). The “Health Reform Observer Observatoire des Réformes de Santé” is an open access, peer-reviewed, online journal presenting the best evidence available on reforms related to the governance, financing and delivery of health care in the Canadian provinces and territories. The journal aims to be a bridge between scholars and decision-makers and facilitate the flow of rigorous, evidence-based information” (see: <https://mulpress.mcmaster.ca/hro-ors/index>). The paper should not be longer than 3,500 words and should otherwise follow HRO Health Reform Analysis guidelines (see: <https://mulpress.mcmaster.ca/hro-ors/hra-template>). The Health Reform Analysis will be due on Tuesday, December 6, 2022 at 11:59 p.m. SK time. Additional details regarding this assignment can be found in the marking guide provided to students.

EVALUATION

A marking guide for each assignment will be provided to students prior to or during the second week of class.

MODULE-SPECIFIC DISCUSSION FORUM ENGAGEMENT (15%)

MODERATION ACTIVITY (20%)

UR COURSES ACTIVITIES (5%)

HEALTH REFORM ANALYSIS (35%)

HEALTHY DEBATE (25%)

USE OF VIDEO AND RECORDING OF THE COURSE

Zoom video conference sessions in this course, including your participation, will be recorded and made available only to students in the course for viewing via Moodle (UR Courses) after each session. This is done, in part, to ensure that students unable to join the session (due to, for example, issues with their internet connection) can view the session at a later time. This will also provide you the opportunity to review any material discussed at your convenience. Students may also record sessions for their own use, but they are not permitted to distribute the recordings (see below).

Please remember that course recordings belong to the instructor, the University, and/or others (like a guest lecturer) depending on the circumstance of each session, and are protected by copyright. Do not download, copy, or share recordings without the explicit permission of the instructor.

For questions about recording and use of sessions in which you have participated, including any concerns related to your privacy, please contact your instructor.

COPYRIGHT

Course materials are provided to you based on your registration in a class, and anything created by your professors and instructors is their intellectual property, unless materials are designated as open education resources. This includes exams, PowerPoint/PDF slides and other course notes. Additionally, other copyright-protected materials created by textbook publishers and authors may be provided to you based on license terms and educational exceptions in the Canadian Copyright Act (see <http://laws-lois.justice.gc.ca/eng/acts/C-42/index.html>).

University of Regina Copyright information: <https://www.uregina.ca/copyright/guidelines/fair-dealing.html>

LATE ASSIGNMENTS

Late assignments will be accepted only in exceptional circumstances after prior approval. Please contact the instructor as soon as possible before the due date to discuss potential conflicts.

ENROLLMENT LIMIT

Class enrollment will be limited to 30 students.

STUDENTS WITH SPECIAL NEEDS

Students in this course who, because of a disability, may have a need for accommodations are encouraged to discuss this need with the instructor and to contact one of the following:

Centre for Student Accessibility – accessibility@uregina.ca or 306-585-4631.
<https://www.uregina.ca/student/accessibility/index.html>

U OF S: Students in this course who, because of a disability, may have a need for accommodations are encouraged to discuss this need with the instructor and to contact Disability Services for Students (DSS) at 966-7273.

STUDENTS EXPERIENCING STRESS

Counselling Services – <http://www.uregina.ca/student/counselling/contact.html> or call (306) 585-4491 between 8:30 a.m. to 4:30 p.m. Saskatchewan time Monday to Friday.

ACADEMIC INTEGRITY AND CONDUCT

Understanding and following the principles of academic integrity and conduct is vital to your success in graduate school. Ensuring that your work is your own and reflects both your own ideas and those of others incorporated in your work is important: ensuring that you acknowledge the ideas, words, and phrases of others that you use is a vital part of the scholarly endeavour. The JSJS has developed an Honour Code (see above) that encapsulates these values.

If you have any questions at all about academic integrity in general or about specific issues, contact any faculty member and we can discuss your questions. For more information, please see:

U of R: Academic Misconduct – <https://www.uregina.ca/president/executive-team/ed-governance-univ-secretary/student-appeals/student-behaviour.html>

USask: Guidelines for Academic Conduct – www.usask.ca/university_secretary/council/reports_forms/reports/guide_conduct.php.

JSJS GRADE DESCRIPTIONS

85+ excellent

A superior performance with consistent strong evidence of:

- a comprehensive, incisive grasp of the subject matter;
- an ability to make insightful critical evaluation of the material given;
- an exceptional capacity for original, creative and/or logical thinking;
- an excellent ability to organize, to analyze, to synthesize, to integrate ideas, and to express thoughts fluently; and
- an excellent ability to apply theories to real-world problems and intersect with related disciplines.

80-85 very good

An *excellent performance* with strong evidence of:

- a comprehensive grasp of the subject matter;
- an ability to make sound critical evaluation of the material given;
- a very good capacity for original, creative and/or logical thinking;
- an excellent ability to organize, to analyze, to synthesize, to integrate ideas, and to express thoughts fluently; and
- a strong ability to apply theories to real-world problems and intersect with related disciplines.

75-80 good

A *good performance* with evidence of:

- a substantial knowledge of the subject matter;
- a good understanding of the relevant issues and a good familiarity with the relevant literature and techniques;
- some capacity for original, creative and/or logical thinking;
- a good ability to organize, to analyze, and to examine the subject material in a critical and constructive manner; and
- some ability to apply theories to real-world problems and intersect with related disciplines.

70-75 satisfactory

A *generally satisfactory and intellectually adequate performance* with evidence of:

- an acceptable basic grasp of the subject material;
- a fair understanding of the relevant issues;
- a general familiarity with the relevant literature and techniques;
- an ability to develop solutions to moderately difficult problems related to the subject material; and
- a moderate ability to examine the material in a critical and analytical manner.