

In relation to applied research, a number of witnesses (including Dr. Naylor, Dr. Mustard, Dr. Psutka and the Canadian Nurses Association) emphasized the need for "innovation" in both the management and delivery of health care services. A recent report by the National Council of Welfare stresses the need for "innovation in the delivery of health care services, as opposed to innovation in medicine".<sup>154</sup>

This report suggests that Medicare "locked in" established patterns of delivering health care and that since it was introduced, there have been relatively few attempts to find better or more cost-effective means of delivering services.

Provincial and territorial Ministers of Health recognized the need for innovation in 1987.<sup>155</sup>

More and more provinces are investing increasing amounts of money in research directed at improving the delivery of health care services. Canadianized versions of Health Maintenance Organizations are being introduced on an experimental basis in Ontario and Quebec. The Victoria Health Project was established in British Columbia to develop better ways to manage health care resources and better serve the aging population. The National Council of Welfare, concerned about provinces duplicating each others' research, recommends in its report that:

( . . . ) federal and provincial governments establish an innovations fund to support research into better and more cost-effective ways of delivering health care services across Canada.<sup>156</sup>

In the Council's view, such an approach would help ensure good evaluation and experiments that are designed to be relevant to more than one province. At the same time, provinces could continue to develop projects with more local than national potential.<sup>157</sup> Moreover, by eliminating duplication of research and sharing of research findings among all the provinces, research efforts could be more cost-effective.

Dr. Jack O'Hashi of the Canadian Medical Association (CMA), on the other hand, is of the view that we should be researching the determinants of disease. Dr. O'Hashi offered the following example:

If, for example, you have ten people in the community who have gall-bladder disease and need to have their gall-bladders out, you are going to have to do that regardless of the number of physicians that are there, the number of hospital beds, whatever.

<sup>154</sup> National Council of Welfare, *Health, Health Care and Medicare*, Ottawa, Autumn 1990, pp. 38-40.

<sup>155</sup> *Future Directions for Health Care Services*, Toronto, p. 9 (a report to the First Ministers' Economic Conference).

<sup>156</sup> National Council of Welfare, *op. cit.*, p. 40.

<sup>157</sup> *Ibid.*, p. 39.