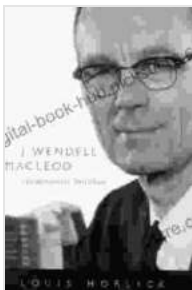


Saskatchewan Red Dean McGill Queen Associated Medical Services Studies

The Saskatchewan Red Dean McGill Queen Associated Medical Services Studies (RDSMQAMSS) were a series of groundbreaking studies conducted in Saskatchewan, Canada, from 1961 to 1971. The studies were designed to evaluate the effectiveness of a new model of health care delivery, known as the "Red Dean Model," which was developed by Dr. Henry E. Red Dean, the Dean of Medicine at the University of Saskatchewan.



J. Wendell Macleod: Saskatchewan's Red Dean (McGill-Queen's/Associated Medical Services Studies in the History of Medicine, Health, and Society Book 29)

by Louis Horlick

★★★★☆ 4.4 out of 5

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Enhanced typesetting : Enabled
Word Wise : Enabled
Print length : 222 pages
Screen Reader : Supported



The Red Dean Model was based on the principle of providing comprehensive health care to rural communities through a network of community health centers. The centers were staffed by a team of health care professionals, including physicians, nurses, and social workers, who

worked together to provide a wide range of services, including preventive care, acute care, and long-term care.

The RDSMQAMSS were funded by the federal government of Canada and were conducted by a team of researchers from the University of Saskatchewan and the University of McGill. The studies were divided into two phases:

* The first phase (1961-1966) was a pilot study that was conducted in two rural communities in Saskatchewan. The study found that the Red Dean Model was effective in providing comprehensive health care to rural communities and improving the health of residents. * The second phase (1966-1971) was a larger study that was conducted in 10 rural communities in Saskatchewan. The study found that the Red Dean Model was effective in reducing the cost of health care, improving the health of residents, and increasing satisfaction with health care services.

The RDSMQAMSS had a significant impact on the development of health care in Saskatchewan and Canada. The studies provided evidence that the Red Dean Model was an effective way to provide comprehensive health care to rural communities. The model was subsequently adopted by other provinces in Canada and has been used as a model for health care delivery in other countries.

History of the RDSMQAMSS

The RDSMQAMSS were the culmination of a long history of efforts to improve health care in rural Saskatchewan. In the early 1900s, Saskatchewan was a sparsely populated province with a high rate of infant mortality and a shortage of health care professionals. In 1911, the

provincial government established a system of rural health units to provide basic health care services to rural communities. However, the system was underfunded and did not meet the needs of the population.

In the 1930s, the provincial government began to experiment with new models of health care delivery, including the use of community health centers. In 1944, the government established the Saskatchewan Health Services Plan, which provided universal health care coverage to all residents of the province. However, the plan did not include rural health centers, and access to health care in rural communities remained poor.

In 1959, Dr. Henry E. Red Dean became Dean of Medicine at the University of Saskatchewan. Red Dean was a strong advocate for rural health care, and he developed a new model of health care delivery that was based on the principle of providing comprehensive health care to rural communities through a network of community health centers.

In 1961, the federal government of Canada provided funding for a pilot study to evaluate the effectiveness of the Red Dean Model. The study was conducted in two rural communities in Saskatchewan, and the results were very promising. In 1966, the federal government provided funding for a larger study that was conducted in 10 rural communities in Saskatchewan.

The RDSMQAMSS were a major success, and they provided evidence that the Red Dean Model was an effective way to provide comprehensive health care to rural communities. The model was subsequently adopted by other provinces in Canada and has been used as a model for health care delivery in other countries.

Purpose of the RDSMQAMSS

The RDSMQAMSS were designed to evaluate the effectiveness of the Red Dean Model of health care delivery. The studies were intended to answer the following questions:

- * Is the Red Dean Model effective in providing comprehensive health care to rural communities?
- * Does the Red Dean Model improve the health of residents in rural communities?
- * Does the Red Dean Model reduce the cost of health care in rural communities?

The RDSMQAMSS were also designed to provide information on the following topics:

- * The organization and delivery of health care services in rural communities
- * The utilization of health care services by residents in rural communities
- * The satisfaction of residents with health care services in rural communities

Findings of the RDSMQAMSS

The RDSMQAMSS found that the Red Dean Model was effective in providing comprehensive health care to rural communities. The studies found that the Red Dean Model improved access to health care, increased the utilization of health care services, and improved the health of residents in rural communities. The studies also found that the Red Dean Model reduced the cost of health care in rural communities.

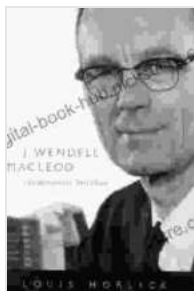
The RDSMQAMSS also found that the Red Dean Model was a popular and effective way to deliver health care in rural communities. The studies found that residents in rural communities were satisfied with the Red Dean Model and that they believed that the model improved their access to health care, their health, and their quality of life.

Impact of the RDSMQAMSS

The RDSMQAMSS had a significant impact on the development of health care in Saskatchewan and Canada. The studies provided evidence that the Red Dean Model was an effective way to provide comprehensive health care to rural communities. The model was subsequently adopted by other provinces in Canada and has been used as a model for health care delivery in other countries.

The RDSMQAMSS also helped to raise awareness of the importance of rural health care. The studies showed that rural communities have unique health care needs and that these needs can be met through a variety of models of health care delivery, including the Red Dean Model.

The RDSMQAMSS continue to be a valuable resource for researchers and policymakers who are interested in improving



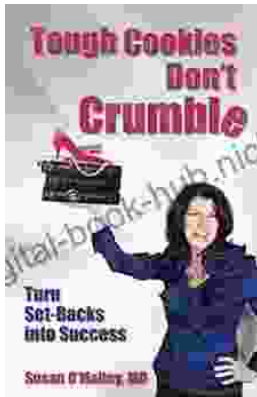
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