# Ministry of Health Library: Knowledge for Health

# Grey Matter: A Collection of Recent NGO, Think Tank, and International Government Reports

Issue 20, 2015, April

Welcome to Grey Matter, the Ministry of Health Library’s Grey Literature Bulletin. In each issue, we provide access to a selection of the most recent NGO, Think Tank, and International Government reports that are relevant to the health context. The goal of this newsletter is to facilitate access to material that may be more difficult to locate (in contrast to journal articles and the news media). Information is arranged by topic, allowing readers to quickly hone in on their key areas of interest. Email library@moh.govt.nz to subscribe.

Click on any of the bulleted points below to go to a section of interest.

**[Nutrition, Physical Activity, & Obesity](#_Nutrition,_Physical_Activity,)**

[**Change & Improvement**](#_Change_&_Improvement)

[**Health of Older People**](#_Health_of_Older)

[**Medicine, Devices & Equipment**](#_Medicine,_Devices_&)

[**Inequalities**](#_Inequalities)

[**Cancer & End of Life Care**](#_Cancer_&_End)

[**Drugs, Alcohol, & Mental Health**](#_Alcohol,_Drugs,_&)

[**Community Health**](#_Community_Health)

[**Public Health**](#_Public_Health)

[**Disability & Social Care**](#_Disability_&_Social)

[**Person-Centered Care**](#_Person-Centred_Care)

[**Primary Care**](#_Primary_Care)

[**Child, Youth, & Maternal Health**](#_Child,_Youth,_&)

[**Health Systems, Reforms & Costs**](#_Health_Systems,_Reforms)

[**Workforce**](#_Workforce)

## Nutrition, Physical Activity, & Obesity

### [The wider economic and social costs of obesity: A discussion of the non-health impacts of obesity in New Zealand](http://www.superu.govt.nz/sites/default/files/downloads/Obesity%20report%20FINAL_0.pdf)

“This report highlights the impact obesity has on our economic, social, cultural and environmental well-being. At an individual and family level it can affect our income levels, educational achievement, self-esteem and social participation. As a society it affects how our taxes are used in government subsidies and even infrastructure.” *Source: Social Policy Evaluation and Research Unit*

### [Using Price Polices to Promote Healthier Diets](http://www.euro.who.int/__data/assets/pdf_file/0008/273662/Using-price-policies-to-promote-healthier-diets.pdf?ua=1)

“This publication provides information on the use of price policies to promote healthy diets and explores policy developments from around the WHO European Region. It examines the economic theory underpinning the use of subsidies and taxation and explores the currently available evidence. The publication includes several case studies from WHO European Member States where price policies have been introduced. It concludes with some observations about the design of more effective price policies.” *Source: World Health Organization*

### [Impact of physical activity and diet on health](http://www.publications.parliament.uk/pa/cm201415/cmselect/cmhealth/845/845.pdf?utm_source=Communications&utm_medium=email&utm_campaign=5509915_RCP+digest+-+27+March+2015&utm_content=HSCfindings&dm_i=1V12,3A3H7,BL6P85,BQOWD,1)

“Diet, obesity, and physical activity all have important impacts on health. For too long however, physical activity has been seen merely in the light of its benefits in tackling obesity. A core message from this inquiry is the compelling evidence that physical activity in its own right has huge health benefits totally independent of a person’s weight. The importance of this—regardless of weight, age, gender or other factors—needs to be clearly communicated.” *Source: House of Commons Health Committee*

### [Examining a Developmental Approach to Childhood Obesity: The Fetal and Early Childhood Years—Workshop in Brief](http://www.iom.edu/Reports/2015/Epigenetics-WIB.aspx)

“The Institute of Medicine (IOM) Food and Nutrition Board and the IOM and the National Research Council Board on Children, Youth, and Families convened a workshop in Washington, DC, to explore the body of evolving science that examines the nexus of biology, interaction between biology and environment, and developmental stage on risk for childhood obesity. The workshop focused on the prenatal period, infancy, and early childhood and evidence from animal and human studies.” *Source: National Academies Press \*sign up for free account to download*

[Back to top](#title)

## Change & Improvement

### [Constructive comfort: accelerating change in the NHS](http://www.health.org.uk/public/cms/75/76/313/5504/Constructive%20comfort%20-%20accelerating%20change%20in%20the%20NHS.pdf?realName=R9AogX.pdf)

“This report asks how best to design national policy on the NHS to accelerate improvements to health care?” *Source: Health Foundation*

### [Building the foundations for improvement](http://www.health.org.uk/public/cms/75/76/313/5506/Building%20the%20foundations%20for%20improvement.pdf?realName=xaxXoz.pdf)

“This report looks at how five UK trusts built quality improvement capability at scale in their organisations. The report provides an insight into how and why the trusts embarked on their improvement journeys, the impact they achieved and the challenges they encountered.” *Source: Health Foundation*

### [Using Communication Approaches to Spread Improvement](http://www.health.org.uk/public/cms/75/76/313/5565/UsingCommunicationsApproachesToSpreadImprovement.pdf?realName=utDV1o.pdf)

“This guide draws on experience, and empirical evidence, to provide practical information about how communications approaches can be used to spread improvement ideas.” *Source: Health Foundation*

### [Evaluation: what to consider](http://www.health.org.uk/public/cms/75/76/313/5564/EvaluationWhatToConsider.pdf?realName=om0B0H.pdf)

“Evaluation is an essential part of quality improvement and when done well it can help solve problems, inform decision making and build knowledge. While evaluation comes in many shapes and sizes, its key purpose is to help us to develop a deeper understanding of how best to improve health care.” *Source: Health Foundation*

### [Open Public Services – Better Public Services](http://www.centreforum.org/assets/pubs/open-public-services.pdf)

“In this report we look at case studies which illustrate what went wrong with both outsourced and in-house service delivery, as well as others which illustrate success. We draw out the common factors which shaped success and failure. We find that whether a service was delivered in the public or private sectors is not the important factor in success or failure.” *Source: Centre Forum*

[Back to top](#title)

## Health of Older People

### [Prime Minister’s challenge on dementia 2020](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/414344/pm-dementia2020.pdf)

The “vision is to create a society by 2020 where every person with dementia, and their carers and families, from all backgrounds, walks of life and in all parts of the country – people of different ages, gender, sexual orientation, ability or ethnicity for example, receive high quality, compassionate care from diagnosis through to end of life care.” *Source: Department of Health*

### [The Appropriate Use of Neuroimaging in the Diagnostic Work-Up of Dementia: An Economic Literature Review and Cost-Effectiveness Analysis](http://www.hqontario.ca/Portals/0/Documents/eds/ohtas/economic-literature-imaging-dementia-140218-en.pdf)

“Given the relative prevalence of vascular dementia and SOLs, and the improvement in QALYs associated with treatment, the strategy with the greatest combined sensitivity (CCC with CT followed by MRI for patients with SOLs) results in the greatest number of QALYs and is the least costly. Due to limitations in the clinical data and challenges in the interpretation of this evidence, the model should be considered a framework for assessing uncertainty in the evidence base rather than providing definitive answers to the research questions.” *Source: Health Quality Ontario*

[Back to top](#title)

## Medicine, Devices & Equipment

### [Access to new medicines in Europe: technical review of policy initiatives and opportunities for collaboration and research](http://www.euro.who.int/__data/assets/pdf_file/0003/273819/WHO-Medicines-Report-FINAL2015.pdf)

“This report, with a focus on sustainable access to new medicines, reviews policies that affect medicines throughout their lifecycle (from research and development to disinvestment), examining the current evidence base across Europe.” *Source: World Health Organization*

### [Efficiency and effectiveness of hospital services: high-value equipment](http://www.audit.vic.gov.au/publications/20150225-Hospital-Equipment/20150225-Hospital-Equipment.pdf)

“This audit examined the efficiency and cost-effectiveness of managing high-value Computed Tomography (CT) and Medical Resonance (MR) scanners in public hospitals.” *Source: Victorian Auditor General’s Office*

### [Evidence on the effectiveness of homeopathy for treating health conditions](http://www.nhmrc.gov.au/guidelines-publications/cam02)

“NHMRC has reviewed the scientific evidence for the effectiveness of homeopathy in treating a variety of clinical conditions with the aim of providing Australians with reliable information about its use.” *Source: National Health and Medical Research Council*

### [Strengthening patient care: Building an effective national medical device surveillance system](http://www.brookings.edu/~/media/research/files/papers/2015/02/23-medical-device-policy-surveillance/med-device-reportweb.pdf)

“This report represents the Planning Board’s long-term vision for a National Medical Device Postmarket Surveillance System (MDS) and recommended strategies for implementation.” *Source: Brookings*

[Back to top](#title)

## Inequalities

### [Informed Consent and Health Literacy](http://www.nap.edu/catalog/19019/informed-consent-and-health-literacy-workshop-summary?utm_source=NAP+Newsletter&utm_campaign=96ea356ed9-NAP_mail_new_2015_03_23&utm_medium=email&utm_term=0_96101de015-96ea356ed9-102579513&mc_cid=96ea356ed9&mc_eid=887bc22fe0)

“Informed consent - the process of communication between a patient or research subject and a physician or researcher that results in the explicit agreement to undergo a specific medical intervention - is an ethical concept based on the principle that all patients and research subjects should understand and agree to the potential consequences of the clinical care they receive. Regulations that govern the attainment of informed consent for treatment and research are crucial to ensuring that medical care and research are conducted in an ethical manner and with the utmost respect for individual preferences and dignity. These regulations, however, often require - or are perceived to require - that informed consent documents and related materials contain language that is beyond the comprehension level of most patients and study participants.” *Source: National Academies Press \*sign up for free account to download*

### [Information for Action: Improving the Heart Health Story for Aboriginal People in Western Australia (BAHHWA Report)](http://www.wacrh.uwa.edu.au/images/publications/BAHHWAReport.pdf)

“This report primarily draws on research looking at disparities between Aboriginal and non-Aboriginal Western Australians in cardiovascular health and health care.” *Source: University of Western Australia*

### [Parity in progress? The All Party Parliamentary Group on Mental Health’s inquiry into parity of esteem for mental health](http://www.mind.org.uk/media/1939983/appg-parity-in-progress-final.pdf)

“It is estimated that 1 in 4 people in the UK are affected by mental health problems. Despite this, the quality of mental health services, and the resources available to them, continues to lag behind physical health.” *Source: All Party Parliamentary Group on Mental Health*

### [The relationship between psychosocial risk factors and health outcomes of chronic diseases: a review of the evidence for cancer and cardiovascular diseases](http://www.euro.who.int/en/publications/abstracts/relationship-between-psychosocial-risk-factors-and-health-outcomes-of-chronic-diseases-a-review-of-the-evidence-for-cancer-and-cardiovascular-diseases-the-2015)

“This report summarizes the best available evidence for a link between psychosocial factors and morbidity and mortality from cardiovascular diseases and cancer in the WHO European Region.” *Source: World Health Organization*

[Back to top](#title)

## Cancer & End of Life Care

### [Every Moment Counts: new vision for coordinated care for people near the end of life calls for brave conversations](http://www.nationalvoices.org.uk/sites/www.nationalvoices.org.uk/files/every_moment_counts_final_with_links.pdf)

“Every Moment Counts: a narrative for person centred coordinated care for people near the end of life sets out how good, coordinated – or integrated – care looks to people near the end of life and is written from their point of view.” *Source: National Council for Palliative Care*

### [Hidden at home: the social care needs of people with cancer](http://www.macmillan.org.uk/Documents/GetInvolved/Campaigns/Carers/hidden-at-home.pdf)

“New research commissioned by Macmillan has now revealed the stark reality that the social care needs of people with cancer are far more widespread than we had expected, and in many cases levels of support are falling woefully short.” *Source: Macmillan Cancer Support*

### [What’s important to me. A Review of Choice in End of Life Care](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/407244/CHOICE_REVIEW_FINAL_for_web.pdf)

“This report identifies the issues people approaching the end of life are currently facing and offers a blueprint for how greater choice in end of life care can be achieved. Our advice is focused around a ‘national choice offer’ – a simple expression of what should be offered to each individual who needs end of life care.” *Source: Choice in End of Life Care Programme Board*

[Back to top](#title)

## Alcohol, Drugs, & Mental Health

### [Fetal alcohol spectrum disorders: a review of interventions for prevention and management in Indigenous communities](http://apo.org.au/files/Resource/ctgc-rs36.pdf)

“This resource sheet provides estimates on the prevalence of fetal alcohol spectrum disorders in the general and Indigenous populations of Australia, and reviews the local and international evidence on the effectiveness of programs that aim to prevent or alleviate this group of disorders.” *Source: Australian Government*

### [International Narcotics Control Board Annual Report](http://www.incb.org/documents/Publications/AnnualReports/AR2014/English/AR_2014.pdf)

“Based on its activities, INCB publishes an annual report that is submitted to ECOSOC through the Commission on Narcotic Drugs. The report provides a comprehensive overview of the drug control situation in various parts of the world. As an impartial body, INCB tries to identify and predict dangerous trends and suggests necessary measures to be taken. In its Annual Report, the Board makes recommendations to Governments and international organizations for improving the global drug control situation.” *Source: International Narcotics Control Board*

### [Understanding the Alcohol Harm Paradox](http://alcoholresearchuk.org/downloads/finalReports/FinalReport_0122.pdf)

“There is good evidence that people with low individual or neighbourhood socioeconomic status (SES) show a greater susceptibility to the harmful effects of alcohol, but a lack of evidence means that it is not possible to conclude what mechanisms and pathways might underlie this difference in risk.” *Source: Alcohol Research UK*

### [New psychoactive substances in Europe. An update from the EU Early Warning System](http://www.emcdda.europa.eu/attachements.cfm/att_235958_EN_TD0415135ENN.pdf)

“This short report provides an update on new psychoactive substances (NPS) in Europe for 2014. It highlights recent developments, including the growth of the market over the past few years, as illustrated by seizures by law enforcement and other indicators, as well as the growing number of serious harms that are being reported as a result.” *Source: European Monitoring Centre for Drugs and Drug Addiction*

### [Improving community health networks for people with severe mental illness: a case study investigation](http://www.journalslibrary.nihr.ac.uk/__data/assets/pdf_file/0004/137236/FullReport-hsdr03050.pdf)

“This research aimed to understand the personal networks of people with severe mental illness (SMI) – connections between people, places and activities – using an approach termed the community health network. The idea was to look at how personal networks were structured, impacts on well-being and the role of practitioners and organisations in accessing resources.” *Source: National Institute for Health Research*

### [The route to employment: the role of mental health recovery colleges](http://www.centreforum.org/assets/pubs/recovery-colleges.pdf)

“Recovery colleges are mental health services with the specific purpose of inspiring hope through their culture, environment and relationships; enabling people to take control of their lives; and facilitating access to opportunities… The rate at which the recovery college model has been taken up suggests that they are effective for users and meet an important need. Initial evidence points to the uniquely educational approach of recovery colleges within secondary mental health services as having significant potential for impact on improving employment outcomes.” *Source: Centre Forum*

[Back to top](#title)

## Community Health

### [The Effectiveness of Diabetes Prevention Programs in Community Settings](http://nyshealthfoundation.org/uploads/resources/report-diabetes-prevention-in-community-settings.pdf)

“This synthesis aimed to identify the full range of studies of community-based diabetes prevention programs, assess the strength of their research methodologies, and weigh the evidence available from this literature.” *Source: University of Chicago*

### [The Role and Potential of Communities in Population Health Improvement](http://www.nap.edu/catalog/18946/the-role-and-potential-of-communities-in-population-health-improvement?utm_source=NAP+Newsletter&utm_campaign=0f3fb9980b-NAP_mail_new_2015_03_03&utm_medium=email&utm_term=0_96101de015-0f3fb9980b-102579513&mc_cid=0f3fb9980b&mc_eid=887bc22fe0)

“The Role and Potential of Communuties in Population Health Improvement is the summary of a workshop held by the Institute of Medicine Roundtable on Population Health Improvement in April 2014 that featured invited speakers from community groups that have taken steps to improve the health of their communities. Speakers from communities across the United States discussed the potential roles of communities for improving population health.” *Source: National Academies Press \*sign up for free account to download*

### [Local leadership, new approaches: improving the health of local communities](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/407060/2014712_Local_leadership.pdf)

“This report is about how local authorities and local health teams work together to improve the health of local communities by focusing on prevention and early intervention.” *Source: Public Health England*

[Back to top](#title)

## Public Health

### [Excess winter deaths and morbidity and the health risks associated with cold homes](http://www.nice.org.uk/guidance/ng6/resources/excess-winter-deaths-and-morbidity-and-the-health-risks-associated-with-cold-homes-51043484869)

“This guideline makes recommendations on how to reduce the risk of death and ill health associated with living in a cold home. The aim is to help meet a range of public health and other goals.” *Source: National Institute for Health and Care Excellence*

### [Not now, not ever: putting an end to domestic and family violence in Queensland](http://www.qld.gov.au/community/documents/getting-support-health-social-issue/dfv-report-vol-one.pdf)

“This report delves into the nature of domestic and family violence and documents some of the work of the deeply committed people who provide services to victims and perpetrators of abuse.” *Source: Queensland Government*

### [Baby makes 3 : Project report](http://www.vichealth.vic.gov.au/~/media/ResourceCentre/PublicationsandResources/PVAW/Sharing%20the%20evidence_Baby%20Makes%203%20Project.ashx)

“The Baby Makes 3 project is an example of promising practice in the emerging field of preventing violence against women. It is a primary prevention program that seeks to prevent violence before it occurs, by promoting equal and respectful relationships between men and women during the transition to parenthood.” *Source: Whitehorse Community Health Service*

### [Adolescent violence in the home : the missing link in family violence prevention and response](http://www.adfvc.unsw.edu.au/PDF%20files/Stakeholder_Paper_11.pdf)

“Adolescent violence in the home reflects a gendered pattern. While both male and female adolescents can and do perpetrate violence against mothers and fathers, male adolescents are more commonly perpetrators and women in the family are more likely to be victims. This paper is particularly concerned with the use of violence by male adolescents against their mothers, as a feature of intergenerational violence.” *Source: Australian Domestic & Family Violence Clearinghouse*

### [Opportunities for early intervention: bringing perpetrators of family violence into view](http://mams.rmit.edu.au/r3qx75qh2913.pdf)

“This report calls for earlier and more proactive intervention in family violence, arguing that while family violence has finally come to attention as a systemic wrong in need of a National Plan, a significant gap exists in our collective response.” *Source: Centre for Innovative Justice*

### [Public Health Implications of Raising the Minimum Age of Legal Access to Tobacco Products](https://www.iom.edu/Reports/2015/TobaccoMinimumAgeReport.aspx)

“In the report, Public Health Implications of Raising the Minimum Age of Legal Access to Tobacco Products, the committee of experts reviews existing literature on tobacco use initiation, developmental biology and psy­chology, and tobacco policy and predicts the likely public health outcomes of raising the MLA for tobacco products to 19 years, 21 years, and 25 years. The committee also uses mathematical modeling to quantify these predictions.” *Source: Institute of Medicine \* sign up for free account to download*

### [Communicating to Advance the Public's Health: Workshop Summary](http://www.nap.edu/catalog/21694/communicating-to-advance-the-publics-health-workshop-summary?utm_source=NAP+Newsletter&utm_campaign=96ea356ed9-NAP_mail_new_2015_03_23&utm_medium=email&utm_term=0_96101de015-96ea356ed9-102579513&mc_cid=96ea356ed9&mc_eid=887bc22fe0)

“On September 22, 2014, the roundtable held a workshop to discuss some of the science of health communication, audiences, and messaging, and to explore what it will take to generate widespread awareness, acceptance, and action to improve health, including through the entertainment media, the news media, and social media. This report summarizes the presentations and discussion of the workshop.” *Source: National Academies Press \*sign up for free account to download*

### [Review of California's Risk-Assessment Process for Pesticides](http://www.nap.edu/catalog/21664/review-of-californias-risk-assessment-process-for-pesticides)

“The California Department of Pesticide Regulation(DPR)conducts human health risk assessments as part of its mission to ensure the protection of workers and public health in the state. The risk assessments identify potential health hazards posed by pesticides, characterize dose-response relationships, and estimate exposure to characterize potential risks to humans. Over the last decade, advances in methods of scientific and technical analysis have led to improvements in the risk-assessment process that have made them more rigorous, transparent, and useful to risk managers. In light of the advances, the California legislature asked DPR to arrange an independent peer review of the agency's risk-assessment practices to ensure that they are scientifically and technically credible.” *Source: National Academies Press \*sign up for free account to download*

### [Emerging Viral Diseases: The One Health Connection](http://www.nap.edu/catalog/18975/emerging-viral-diseases-the-one-health-connection-workshop-summary?utm_source=NAP+Newsletter&utm_campaign=96ea356ed9-NAP_mail_new_2015_03_23&utm_medium=email&utm_term=0_96101de015-96ea356ed9-102579513&mc_cid=96ea356ed9&mc_eid=887bc22fe0)

“Emerging Viral Diseases is the summary of a public workshop hosted in March 2014 to examine factors driving the appearance, establishment, and spread of emerging, re-emerging and novel viral diseases; the global health and economic impacts of recently emerging and novel viral diseases in humans; and the scientific and policy approaches to improving domestic and international capacity to detect and respond to global outbreaks of infectious disease. This report is a record of the presentations and discussion of the event.” *Source: National Academies Press \*sign up for free account to download*

### [Tackling the causes of premature mortality (early death)](http://www.nice.org.uk/advice/lgb26/resources/non-guidance-tackling-the-causes-of-premature-mortality-early-death-pdf)

“This briefing summarises NICE's recommendations for local authorities and partner organisations on tackling the more direct causes of premature mortality.” *Source: National Institute for Health and Care Excellence*

[Back to top](#title)

## Disability & Social Care

### [Optimising support for informal carers of the long-term disabled to enhance resilience and sustainability](http://apo.org.au/files/Resource/briefing_document_informalcarersupport_final_.pdf)

“Optimising carer resilience has direct benefits to carers, and additional benefits to the overall care support system by reducing dependence on paid care.” *Source: National Trauma Research Institute*

### [NHS adult hearing services in England: exploring how choice is working for patients](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/409273/Adult_hearing_services_-_Monitor_s_report.pdf)

“This project looked at how choice is working in NHS-funded adult hearing services in England.” *Source: Monitor*

### [Towards solutions for assistive technology](http://apo.org.au/files/Resource/assistive_technology_discussion_paper_0.pdf)

“This document outlines the elements of a proposed service delivery approach for individuals to access assistive technology solutions.” *Source: National Disability Insurance Agency*

### [Husband, Partner, Dad, Son, Carer? A survey of the experiences and needs of male carers](http://www.carers.org/sites/default/files/male_carers_research.pdf)

“Little research has been undertaken to understand the experiences of this vast and hidden group within the population, despite knowledge that men in general have poorer health than women, and their caring roles are likely to be complex, juggling work and care as well as coping with society’s stereotypes of caring.” *Source: Carers Trust*

### [The Future of Home Health Care](http://www.nap.edu/catalog/21662/the-future-of-home-health-care-workshop-summary?utm_source=NAP+Newsletter&utm_campaign=96ea356ed9-NAP_mail_new_2015_03_23&utm_medium=email&utm_term=0_96101de015-96ea356ed9-102579513&mc_cid=96ea356ed9&mc_eid=887bc22fe0)

“Individuals with disabilities, chronic conditions, and functional impairments need a range of services and supports to keep living independently. However, there often is not a strong link between medical care provided in the home and the necessary social services and supports for independent living. Home health agencies and others are rising to the challenges of meeting the needs and demands of these populations to stay at home by exploring alternative models of care and payment approaches, the best use of their workforces, and technologies that can enhance independent living. All of these challenges and opportunities lead to the consideration of how home health care fits into the future health care system overall.” *Source: National Academies Press \*sign up for free account to download*

[Back to top](#title)

## Person-Centred Care

### [Evaluation of Services Our Way](https://www.sprc.unsw.edu.au/media/SPRCFile/Services_Our_Way_Evaluation_2014.pdf)

“An evaluation of Services Our Way, a NSW Government service model designed to build the capacity of Aboriginal people to have greater access to mainstream and disability services and encourage self-directed support.” *Source: University of New South Wales*

### [Consumer expectations and healthcare in Australia](http://ahha.asn.au/system/files/docs/publications/deeble_issues_brief_nlcg-3_consumer_expectations_and_healthcare_in_australia.pdf)

“Increasingly, consumers expect their governments, health services and health practitioners to assist them to be: more informed and involved generally; manage their health where possible; and provide prompt, appropriate and individualised help when required. As such, listening, shaping and responding to consumer expectations of healthcare could now be seen as a critical strategic area within healthcare policy for re-orienting health systems, services and practitioners.” *Source: Australian Healthcare and Hospitals Association*

[Back to top](#title)

## Primary Care

### [Patient access to general practice: ideas and challenges from the frontline](http://www.rcgp.org.uk/news/2015/february/~/media/Files/Policy/A-Z-policy/Patient-access-to-general-practice-2015.ashx)

“Across the UK, GP practices are pioneering new approaches to providing patients with access to their services, despite the huge financial and workload pressures facing general practice. This paper explores some of the initiatives being tested and looks at what solutions and challenges are emerging. Its findings are relevant to individual clinicians and practices, but also have implications for commissioners and policy makers at both a national and local level.” *Source: Royal College of General Practitioners*

### [The GP Co-payment: A Short Postmortem and a New Research Agenda on Medicare](http://melbourneinstitute.com/downloads/policy_briefs_series/pb2015n01.pdf)

“The aim of this Policy Brief is to show what the debate about the GP co-payment has revealed about the state of evidence-based policy in Australia. The co-payment debate has highlighted the central role played by price signals and their impact on health care costs and population health. It has also highlighted how little research existed to inform the co-payment debate, and any future changes to Medicare.” *Source: Melbourne Institute*

### [Evaluation of the Comprehensive Primary Care Initiative: First Annual Report](http://innovation.cms.gov/Files/reports/CPCI-EvalRpt1.pdf)

“The Centers for Medicare & Medicaid Services (CMS) released promising findings from the Comprehensive Primary Care Initiative. The annual report evaluated the program in its first year and found that it decreased hospital admissions by 2% and emergency department visits by 3%, contributing to the reduction of expenditures nearly enough to offset care management fees paid by CMS.” *Source: Centers for Medicare & Medicaid Services*

### [Building primary care in a changing Europe](http://www.euro.who.int/__data/assets/pdf_file/0018/271170/BuildingPrimaryCareChangingEurope.pdf?ua=1)

“Primary care in Europe is facing high expectations. It is expected that primary care can help health systems become more responsive to changing health needs; offer more integrated care delivery; and increase the efficiency of the system overall. Decision-makers are searching for models to redesign primary care systems in line with these promises. At present, however, international comparative information on the structure, process and outcomes of primary care in Europe is limited. This book seeks to meet the need for information by mapping primary care in 31 European countries using a monitoring instrument developed in the PHAMEU project. In addition to describing essential features of primary care, this volume aims to contribute to answering the question of the added value of strong primary care for the performance of health care systems.” *Source: European Observatory*

[Back to top](#title)

## Child, Youth, & Maternal Health

### [Investing in Children’s Mental Health: A review of evidence on the costs and benefits of increased service provision](http://www.centreformentalhealth.org.uk/pdfs/investing_in_childrens_mental_health.pdf)

“This report summarises the available evidence on the effectiveness and value for money of

interventions for child and adolescent mental health problems.” *Source: Centre for Mental Health*

### [Supportive Relationships and Active Skill-Building Strengthen the Foundations of Resilience](http://developingchild.harvard.edu/index.php/download_file/-/view/1792/)

“This Working Paper from the National Scientific Council on the Developing Child explains how protective factors in the social environment and highly responsive biological systems interact to produce resilience, and discusses strategies that promote healthy development in the face of significant adversity.” *Source: National Scientific Council on the Developing Child*

### [DRIVERS: social inequalities in early childhood health and development, evidence and policy implications](http://health-gradient.eu/wp-content/uploads/2015/03/DRIVERS_WP2_Early_Child_Development_Final_Report.pdf)

“Little is known about the extent to which social inequalities in childhood health and development differ in scale across Europe. Furthermore, it is not well understood how the mechanisms that explain these inequalities operate across different settings or the impact that programmes and policies, which aim to address social inequalities in early childhood, may have in different contexts. The purpose of the DRIVERS component on early childhood development is to address these three gaps in order to develop new evidence and inform future practice.” *Source: University College London*

[Back to top](#title)

## Health Systems, Reforms & Costs

### [Incentives to follow Best Practice in Health Care](https://www.ohe.org/publications/incentives-follow-best-practice-health-care)

“There has been long-standing interest in the use of incentives to encourage delivery of high-quality health care services at the lowest feasible cost. Although it is clear that health care professionals have intrinsic incentives to deliver high-quality care to patients, there are significant variations in quality standards achieved in practice, indicating that a desire to see patients thrive is on its own insufficient to ensure uniformly high standards of care. It is important that the health system provides incentives to add to intrinsic motivation.” *Source: Office for Health Economics \*sign up for free account to download*

### [Do Respondents Completing Abstract, Hypothetical Priority-Setting Exercises Agree with the Policy Implications of Their Choices?](https://www.ohe.org/news/do-respondents-completing-abstract-hypothetical-priority-setting-exercises-agree-policy)

“A recent OHE study, commissioned by the Pharmaceutical Oncology Initiative, examined the impact of alternative presentations of hypothetical priority setting scenarios, and the extent to which the study respondents agreed with the policy implications of their responses to stated preference tasks… The results show that people’s stated preferences regarding hypothetical scenarios are influenced by the way in which the information is presented to them. They also show that people do not always agree with the policy implications of their responses to the stated preference tasks.” *Source: Office of Health Economics \*sign up for free account to download*

### [Putting Patients in Charge: The Future of Health and Social Care](http://www.smf.co.uk/wp-content/uploads/2015/03/Social-Market-Foundation-Publication-Putting-Patients-in-Charge-The-future-of-health-and-social-care-Embargoed-0001-040315.pdf)

“The divisions between health and social care lead to excessive pressure on hospitals and emergency care and too little investment in preventative care or support at home. Patients and their carers are often left confused. These problems are only set to worsen as more people live into old age and experience multiple, complex and chronic conditions. This report looks at ‘how’ to address these challenges and sets out proposals for reform.” *Source: Social Market Foundation*

### [What’s behind the A&E ‘crisis’?](http://www.nuffieldtrust.org.uk/sites/files/nuffield/publication/election_briefing_urgent_care_in_crisis_final_web.pdf)

“What’s behind the A&E ‘crisis’? by Nigel Edwards, Ian Blunt and Leonora Merry, explores the way that performance is measured in A&E and argues that new approaches to performance management, with other measures given equal status to the four-hour target, should be adopted.” *Source: Nuffield Trust*

[Back to top](#title)

## Workforce

### [Building a supportive environment: a review to tackle undermining and bullying in medical education and training](http://www.gmc-uk.org/Under_embargo_05_03_15_Building_a_supportive_environment.pdf_59988406.pdf)

“Departments, deaneries and local education and training boards (LETBs) should be alert for signs of undermining and bullying, and should acknowledge and take ownership of any issues that arise. Meeting to discuss problems as a group, and obtaining external support, can help departments facilitate this.” *Source: General Medical Council*

### [Changing health professionals' scope of practice: How do we continue to make progress?](http://ahha.asn.au/system/files/docs/publications/deeble_issues_brief_nlcg-4_changing_health_professionals_scope_of_practice.pdf)

“There is evidence that the current organisation of health professionals and health practitioners, and their associated scope of practice, are not suited to meet the needs of the Australian health system. Furthermore, there is no agreement on coherent policy for the health workforce even though the national, state, and territory governments have focused on this issue. There are no ready-made solutions waiting on the shelf, but there are a number of actions policymakers can take.” *Source: Deeble Institute*

[Back to top](#title)

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