



## Ministry of Health Library

*Knowledge for health*

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

Issue 15, 2014 October

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](mailto:library@moh.govt.nz) to subscribe.

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## Public Health Issues

### [Implications of Health Literacy for Public Health: Workshop Summary](#)

"Implications of Health Literacy for Public Health is the summary of a workshop convened by the Institute of Medicine Roundtable on Health Literacy in November 2013 that focused on the implications of health literacy for the mission and essential services of public health. The workshop featured the presentation of a commissioned paper on health literacy activities under way in public health organizations. Other presentations examined the implications of health literacy for the mission and essential services of public health, for example, community health and safety, disease prevention, disaster management, or health communication." *Source: Institute of Medicine*  
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### [Public Mental Health Priorities: Investing in the Evidence](#)

"This report includes a focus on the epidemiology of public mental health and the quality of the evidence base, 'horizon scanning' of innovation in science and technology, the economic case for good mental health and chapters outlining the importance of both treating mental health as equal to

physical health and of focusing on the needs and safety of people with mental illness. The chapters also include authors' suggestions for improvement." *Source: UK Department of Health*

### **[Preventing suicide: a global imperative](#)**

"This is the first-ever WHO report on suicide prevention. It aims to increase awareness of the public health significance of suicide and suicide attempts, to make suicide prevention a higher priority on the global public health agenda, and to encourage and support countries to develop or strengthen comprehensive suicide prevention strategies in a multisectoral public health approach." *Source: WHO*

### **[Electronic nicotine delivery systems: report by the World Health Organization](#)**

"This document was prepared in response to the request made by the Conference of the Parties (COP) at its fifth session (Seoul, Republic of Korea, 12–17 November 2012) to the Convention Secretariat to invite WHO to examine emerging evidence on the health impacts of electronic nicotine delivery systems (ENDS) use and to identify options for their prevention and control." *Source: WHO*

### **[Working together to prevent family and sexual violence in Auckland : an approach](#)**

"This literature review is aimed at outlining where New Zealand sits on matters of family and sexual violence – both in terms of impacts and in terms of current policies and programmes – and what steps we might take to address these issues. We particularly pay attention to the role that local government bodies such as the Auckland Council can play in addressing violence." *Source: Point Research*

### **[Why Pets Mean So Much: The Human-Animal Bond in the Context of Intimate Partner Violence](#)**

"Up to 70% of domestic violence victims report having a pet, and when a batterer causes violence in the home, it can be inflicted on pets as well (Ascione, 1997; Loring & Bolden-Hines, 2004). Abusers threaten, injure, and at times kill pets in order to control their victims and to create an environment of fear within the home. The close relationship that battered women and their children feel toward their companion animals complicates their willingness to leave a violent situation, potentially putting their pets at risk of violence or death. Developed by the Animal Welfare Institute, this Technical Assistance Guidance explores ways that victim advocates can assist survivors of domestic violence and their pets when seeking safety and refuge from abuse." *Source: National Resource Center on Domestic Violence*

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## **Systems, Costs & Reform**

### **[Comparing Lean and Quality Improvement](#)**

"The white paper provides a brief overview of the issues and some key definitions, followed by more detailed descriptions of Lean and the IHI approach to quality improvement (referred to as "IHI-QI" throughout the paper)." *Source: Institute for Healthcare Improvement*

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### **[More than money: closing the NHS quality gap](#)**

"That the NHS faces a significant financial challenge is well known and much discussed. This 'financial gap' has been projected to reach £30bn by 2021. This is due to the disparity between the pressures on the NHS and the projected resources available to it. More than money: closing the NHS quality gap discusses the implications of this financial gap for quality of care in the NHS. It argues that additional resources alone will not be enough to close the 'quality gap': the difference between the quality of care the NHS should deliver, and what it is capable of delivering." *Source: Health Foundation*

### **[Economic Evaluation of Complex Health System Interventions: A Discussion Paper](#)**

"The discussion paper will provide guidance to those tasked with conducting an economic evaluation of complex health system interventions. The guidance will be an elaboration of existing national guidelines for economic evaluation, and serve as a discussion paper to aid investigators conducting economic evaluations of complex health interventions." *Source: Institute for Health Economics*

### **[Health, austerity and economic crisis: assessing the short-term impact in OECD countries](#)**

"This paper looks at the impact of economic crisis on health and health care. It summarises findings from the published literature on the effects of economic crisis that took place over the past few

decades and also describes recent health policy reforms, focusing on those countries where the economic crisis has hit hardest. Finally, this paper analyses the empirical relationship between unemployment and health care use, quality and health outcomes, using data from OECD Health Statistics.” *Source: OECD*

### **Regulatory institutions and practices**

“The purpose of this inquiry is to develop recommendations on how to improve the design of new regulatory regimes and make system-wide improvements to the operation of existing regulatory regimes in New Zealand. The inquiry is not a review of individual regulators, specific regulations or the objectives of regimes.” *Source: New Zealand Productivity Commission*

### **On effective, accessible and resilient health systems**

“This Communication focuses on actions to: 1. Strengthen the effectiveness of health systems; 2. Increase the accessibility of healthcare; [and] 3. Improve the resilience of health systems.” *Source: European Commission*

### **Closing the Loop: Why We Need to Invest—and Reinvest—in Prevention**

“In their discussion paper, Cohen and Iton propose a sustainable model for funding prevention strategies. By pooling and managing prevention funds from federal, state, and local sources, philanthropies, and others based on population needs, and investing in evidence-informed strategies in communities, the prevention system continuously captures and reinvests savings through intermediary organizations that support the development of community strategies to improve health, reduce costs, and the need for additional health care, thereby creating a virtuous cycle of investment before people are sick or injured.” *Source: Institute of Medicine*

### **Smart governance for health and well-being: the evidence**

“Governance for health describes the attempts of governments and other actors to steer communities, whole countries or even groups of countries in the pursuit of health as integral to well-being. This study tracks recent governance innovations to address the priority determinants of health and categorizes them into five strategic approaches to smart governance for health. It relates the emergence of joint action by the health and non-health sectors, public and private actors and citizens, all of whom have an increasing role to play in achieving seminal changes in 21st century societies.” *Source: World Health Organization*

### **Commissioning and funding general practice: Making the case for family care networks**

“This paper describes the current system of commissioning and funding general practice and how this is being used in four areas of England to develop innovative models of primary care provision. The current system contains a range of freedoms and flexibilities and these are enabling general practices to provide a wider range of services and to raise standards of care. This is leading to greater collaboration between practices and the emergence of federations and networks operating on a larger scale than has traditionally been the case.” *Source: King’s Fund*

### **Transforming Mental Health: A Plan of Action for London**

“This report describes a vision for the future of mental health provision in London, generated through a process of engagement with key stakeholders in the capital. The vision is based on a collaborative, integrated approach towards mental health that is relevant in London and elsewhere.” *Source: King’s Fund*

### **Geographic Variations in Health Care: What Do We Know and What Can Be Done to Improve Health System Performance?**

“Variations in health care use within a country are complicated. In some cases they may reflect differences in health needs, in patient preferences or in the diffusion of a therapeutic innovation; in others they may not. There is evidence that some of the observed variations are unwarranted, signalling under- or over-provision of health services, or both. This study documents geographic variations for high-cost and high-volume procedures in select OECD countries.” *Source: OECD*

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## Inequality

### [Indicators of inequality for Māori and Pacific people](#)

“This study investigates a number of inequality indicators in New Zealand. The research examines the current gaps in the indicators between the European population, and Māori and Pacific people. The study also undertakes a comparison of the changes in the gaps over a period approximating 10 years for each of the indicators. A total of 21 indicators are investigated in this study, incorporating measures of health; knowledge and skills; employment; standards of living; cultural identity; and social connectedness.” *Source: Victoria Business School*

### [The Relative Contribution of Multiple Determinants to Health Outcomes](#)

“In this issue brief we focus on multiple determinant studies that seek to quantify the relative influence of the major categories of determinants on health.” *Source: Health Affairs*

### [The relative effectiveness of Aboriginal Community Controlled Health Services compared with mainstream health service](#)

“The literature review underpinning this brief found a dearth of evidence on the relative effectiveness of ACCHS compared with mainstream health services. However, a range of studies have been conducted which indicate that services provided by ACCHS are valued by their Aboriginal clients. In addition, there is some evidence that innovative models of care, such as partnerships with mainstream health services, may be beneficial.” *Source: Deeble Institute*

### [Funding Indigenous organisations: improving governance performance through innovations in public finance management in remote Australia](#)

“In this review, block funding was identified for its potential to reform the public finance system to create enabling conditions for enhanced Indigenous governance. Building a devolved accountability framework around the organisation, rather than the centralised grant program, is a sensible alternative to multiple grants and ineffective cycles of grant risk management and attendant accountability measures. As block funding has never been explicitly trialled in Australia, there is a lack of evaluations and other evidence for its efficacy in remote Indigenous contexts. In comparison, the international development literature documents a wealth of experience of the success and shortcoming of generically similar financing modalities. The paper therefore considers the circumstances under which block funding could be usefully adapted to the unique context of remote Indigenous communities in Australia.” *Source: Australian Institute of Health and Welfare*

### [Due North: The report of the Inquiry on Health Equity for the North](#)

“The aim of this inquiry is to develop recommendations for policies that can address the social inequalities in health within the North and between the North and the rest of England.” *Source: University of Liverpool and Centre for Local Economic Strategies*

### [Premature deaths of people with learning disabilities: progress update](#)

“This report outlines the action being taken to improve the experience of people with learning disabilities in hospital and reduce premature deaths. It shows progress against the 18 recommendations in the Confidential Inquiry into premature deaths of people with learning disabilities both locally and nationally.” *Source: UK Department of Health*

### [Tackling health inequities: from concepts to practice. The experience of Västra Götaland](#)

“This publication, produced by Region Västra Götaland and the WHO Regional Office for Europe, adds to the growing number of reports on joint efforts to tackle health inequalities. Governance for equitable health requires the involvement of a broad spectrum of stakeholders as well as contextual flexibility for framing the problem. The joint venture to create an action plan for social sustainability and health equity in Västra Götaland, Sweden serves as an example of the pitfalls and the possibilities of collaborative processes.” *Source: WHO*

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## Child & Youth Health

### [Investing in children: the European child and adolescent health strategy 2015–2020](#)

“The aims of the renewed strategy are to: enable children and adolescents in the WHO European Region to realize their full potential for health, development and well-being; and reduce their burden of avoidable disease and mortality.” *Source: WHO*

### [The Power of Youth in Improving Community Conditions for Health](#)

“Though a common target for health-improving efforts, young people are not often regarded as agents of change for healthier communities. However, a growing number of successful health-supportive policy, environment, and systems-change efforts trace their impetus to youth involvement. Not only are youth proving to be catalysts and prolific communicators in social movements, but their involvement signals a potential for career choices and civic stewardship that portends improving population health and equity in the years to come. This discussion paper examines promising models of youth involvement in social movements for better community health, some of which recently came to the attention of the Roundtable on Improving Population Health.” *Source: Institute of Medicine*

### [Committing to child survival: a promise renewed – progress report 2014](#)

“This report discusses global trends in under-five and neonatal mortality since 1990, and also analyses key interventions for mothers and their newborns, highlighting a gap between contact with the health system and the quality of care received.” *Source: Unicef*

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## Workforce

### [Scenario generation: Enhancing scenario generation and quantification](#)

“This technical paper addresses improvements to the scenario generation stage of the Centre for Workforce Intelligence’s robust workforce planning framework, in particular on scenario generation and quantification. The methods have been tested on a new project – Horizon 2035 – the purpose of which is to consider different workforce futures for health, social care and public health 20 years from now.” *Source: Centre for Workforce Intelligence*

### [Competencies for the mental health and addiction service user, consumer and peer workforce](#)

“This document provides a set of competencies for this workforce that can also inform training curricula, job descriptions, performance management systems, self-assessment processes, service specifications, auditing and more. They were developed from a scan of national and international literature and consultation and advice from consumer/service user and peer support workers and leaders around New Zealand. This included a reference group of people working in consumer/service user/peer leadership roles from around the country and a number of forums in the Midland region.”

*Source: Te Pou*

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## Social Care

### [The Commission on Residential Care](#)

“The Commission recommends a number of measures to embed good practice and challenge public perceptions. These include enshrining a broader, more accurate definition of ‘housing with care’ throughout government policy; greater co-location of care settings with other community services such as colleges; the expansion of CQC’s role in inspecting commissioning practices; and promoting excellence in the profession through the introduction of a license to practice and a living wage. The Commission concludes that these measures, among others, could help build a housing with care sector fit for the twenty-first century.” *Source: DEMOS*

### [A new settlement for health and social care](#)

“The commission produced an interim report in April 2014 in which it concluded that England needs a single health and social care system, with a ring-fenced, singly commissioned budget, and more closely aligned entitlements. The commission has now developed its thinking and in this final report sets out its vision of: how to create a system of care that works better and more appropriately for

individuals and their carers [and] how far social care costs should be funded by those in need and their families, and how far they should be shared across society (as we are committed to doing for health care costs).” *Source: The King’s Fund*

### [Carers at breaking point](#)

“This research sets out the findings from Carers UK’s State of Caring Survey 2014, examining the experiences of over 5,200 carers – asking if they have ever reached breaking point, the causes of crisis and what support would have prevented it. Their experiences show that insufficient support from health and social care services is leaving carers isolated, burnt-out and unable to look after their own health.” *Source: Carers UK*

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## Health of Older People

### [Blueprint for an ageing Australia](#)

“This document—Blueprint for an Ageing Australia—is built around that idea that living longer is a good thing, that the rising average age of our population is a vindication of advances in science and health policy, and that the best way to approach it is to look for ways that older Australians can participate more effectively in our society and our economy to the best of their abilities. The Blueprint is, ultimately, based on the reality that ageing isn’t something that happens to other, older people, it happens to all of us and it is in all our interests to make it a more positive experience for everyone.”

*Source: Per Capita*

### [Growing older positively: the challenge of ageing with HIV](#)

“This report reviews how HIV is strategically planned for and managed in the UK today and develops recommendations for Government and the NHS in light of changes in the patient profile. The goal must be to ensure that with appropriate care and support everyone with HIV can live a long and fulfilled life.” *Source: 2020 Health*

### [Dementia 2014: Opportunity for change](#)

“Dementia 2014: Opportunity for change provides a comprehensive summary of some key areas affecting people with dementia over the last year in England, Wales and Northern Ireland. It considers the significant political and public attention on dementia in this period and what impact this is having for people living with the condition. It gives an update of aspects of dementia research including trials, cause, prevention, care and treatment. It explores how well people are living in their communities and details the changes that need to be made to improve their quality of life.” *Source: Alzheimer’s Society*

### [World Alzheimer Report 2014: Dementia and Risk Reduction](#)

“The World Alzheimer Report 2014, Dementia and Risk Reduction: An analysis of protective and modifiable factors critically examines the evidence for the existence of modifiable risk factors for dementia. It focuses on sets of potential modifiable risk factors in four key domains: developmental, psychological and psychosocial, lifestyle and cardiovascular conditions. The report makes recommendations to drive public health campaigns and disease prevention strategies.” *Source: Alzheimer’s Disease International*

### [Getting ready for ageing: A manifesto for action](#)

“This report sets out the Ready for Ageing Alliance’s recommendations for action so that we can be ready for ageing, organised around a series of key themes. Unlike most such reports it also includes a section on what you, the reader, can do to ensure you are ready for ageing too, since demographic change isn’t about ‘them’, it is about ‘us’.” *Source: Ready for Ageing Alliance*

### [Strategic commissioning of long-term care: can we get more for less?](#)

“This White Paper seeks to analyse the state of the UK market in care services for older people, to identify the market failures (and achievements) and to ask if there are any ways to correct the failures.” *Source: LaingBuisson*

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## Cancer & End of Life Care

### [Measuring up? The health of NHS cancer services](#)

“This report highlights key concerns regarding the pressures on NHS cancer services following the NHS reorganisation and the Health and Social Care Act 2012. It calls for urgent action to increase investment, particularly in diagnostic services, and also highlights the need to review both the leadership and commissioning of cancer services so they are fit to meet the looming demands of an ageing population and the predicted rapid increase in cancer cases.” *Source: Cancer Research UK*

### [Saving lives, averting costs: An analysis of the financial implications of achieving earlier diagnosis of colorectal, lung and ovarian cancer](#)

“There is now good evidence that earlier diagnosis can be effectively encouraged, through a combination of screening, public awareness, clinician education and better access to diagnostics. However, the financial implications of achieving earlier diagnosis are less well understood. This report seeks to consider the cost impact of earlier diagnosis on cancer treatment services.” *Source: Cancer Research UK*

### [Dying Well](#)

“This report is about how, where and with whom we die. The baby boomers are growing old, and in the next 25 years the number of Australians who die each year will double. People want to die comfortably at home, supported by family and friends and effective services.” *Source: Grattan Institute*

### [Exploring the cost of care at the end of life](#)

“This work demonstrates how crucial it is that we develop better ways to understand resource use in everyday care. This would help care services to be responsive to the needs of those near to death, so they can provide support and care in the most appropriate setting for the individual.” *Source: Nuffield Trust*

### [Dying in America: Improving Quality and Honoring Individual Preferences Near the End of Life](#)

“A substantial body of evidence shows that broad improvements to end-of-life care are within reach. In *Dying in America*, a consensus report from the Institute of Medicine (IOM), a committee of experts finds that improving the quality and availability of medical and social services for patients and their families could not only enhance quality of life through the end of life, but may also contribute to a more sustainable care system.” *Source: Institute of Medicine*

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## Drugs/Pharmaceutical Policy & Evidence

### [Health Policy Brief: Drug Shortages](#)

“The brief traces the role of the FDA in regulating drug shortages. A 2011 report by the Government Accountability Office (GAO) noted that the FDA lacked the authority to address this problem, and that steps were needed “to effectively evaluate its work and improve its ability to protect the public health. The brief details subsequent efforts by the Executive branch and Congress, including a drug shortage task force and a 2013 strategic plan to prevent and mitigate drug shortages. The brief also examines the efforts of the Generic Pharmaceutical Association, the key trade association, to improve communication between manufacturers, the FDA, and stakeholders, a move that so far has not had a significant impact.” *Source: Health Affairs*

### [Taking Control: Pathways to Drug Policies that Work](#)

“The Global Commission proposes five pathways to improve the global drug policy regime. After putting people’s health and safety at the center of the picture, governments are urged to ensure access to essential medicines and pain control. The Commissioners call for an end to the criminalization and incarceration of users together with targeted prevention, harm reduction and treatment strategies for dependent users. In order to reduce drug related harms and undermine the power and profits of organized crime, the Commission recommends that governments regulate drug markets and adapt their enforcement strategies to target the most violent and disruptive criminal groups rather than punish low level players.” *Source: Global Commission on Drug Policy*

### [New Psychoactive Substances - Evidence Review](#)

“This paper summarises the key information currently available on New Psychoactive Substances (NPS) and evidence gaps. The paper is structured around the themes of - demand/ prevalence of use, supply, impact/ harms, responses (enforcement, prevention, and treatment); and evidence gaps. In each section, information on what we know about NPS in Scotland is set in the context of information from the rest of the UK and internationally. The paper concludes with a list of areas requiring further research.” *Source: Scottish Government*

### [National Strategy for Combating Antibiotic-Resistant Bacteria](#)

“The National Strategy for Combating Antibiotic Resistant Bacteria identifies priorities and coordinates investments: to prevent, detect, and control outbreaks of resistant pathogens recognized by CDC as urgent or serious threats, including carbapenem-resistant Enterobacteriaceae (CRE), methicillin-resistant Staphylococcus aureus (MRSA), ceftriaxoneresistant Neisseria gonorrhoeae, and Clostridium difficile.” *Source: The White House*

### [Report to the President on Combating Antibiotic-Resistant Bacteria](#)

“In November 2013, President Obama tasked his President’s Council of Advisors on Science and Technology (PCAST) with making practical and actionable recommendations concerning how the Federal Government can best combat the rise of antibiotic resistance that is threatening the health of Americans and people around the world. To respond to this request, PCAST rapidly assembled a taskforce of 15 non-Federal experts in the field of antibiotic resistance and also consulted with experts across Federal agencies. Informed by extensive discussions with these experts, PCAST developed this report.” *Source: Executive Office of the President*

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## **Person-Centred Initiatives**

### [Patients in control: why people with long-term conditions must be empowered](#)

“This report purposely focuses on what ‘good’ looks like from the point of view of people with long-term conditions who want to have more control. It explores what people’s priorities are, in order to truly put patients’ views at the centre of its proposals. It considers what giving patients more control means and requires, rather than jumping straight into service-redesign.” *Source: Institute for Public Policy Research*

### [People helping people: The future of public services](#)

“This report argues that mobilising the energy and contributions of members of the public should become a core organising principle for public services. Doing so would increase the resources available to achieve social goals, such as by offering tutoring to children and young people to increase their educational attainment. It would give public services access to new expertise and knowledge; people with long-term health issues, such as diabetes, could find support from those in a similar position, drawing on their understanding of managing their condition. It would provide a way of reaching people who public services cannot reach, or giving them more support than public services can offer.” *Source: Nesta*

### [The Role and Potential of Communities in Population Health Improvement: Workshop Summary](#)

“The Role and Potential of Communities 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. The workshop focused on youth organizing, community organizing or other types of community participation, and partnerships between community and institutional actors. This report explores the roles and potential of the community as leaders, partners, and facilitators in transforming the social and environmental conditions that shape health and well-being at the local level.” *Source: Institute of Medicine*  
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### [Investigating the future of self-supported management](#)

“The initiative Investigating the Future of Supported Self-Management comprised an Expert Panel to identify the key issues and challenges around the implementation of supported self-management programmes within the health service.” *Source: Abbvie*

### [Shared Decision-Making Strategies for Best Care: Patient Decision Aids](#)

“This discussion paper seeks to stimulate action toward embedding SDM—which has been called the “pinnacle” of patient-centered care—into clinical practice. As such, the authors focus particular attention on the need to ensure the quality, integrity, and availability of patient decision aids.” *Source: Institute of Medicine*

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## **Nutrition, Physical Activity & Obesity**

### [Looking Beyond the Marketing Claims of New Beverages Health Risks of Consuming Sports Drinks, Energy Drinks, Fortified Waters and Other Flavored Beverages: Health Risks of Consuming Sports Drinks, Energy Drinks, Fortified Waters and Other Flavored Beverages](#)

“This report will discuss the major categories of fortified beverages, presenting data on their nature, their ingredients, their similarities and differences, the possible effects on children of their consumption, and areas for further research.” *Source: University of California at Berkeley, Atkins Center for Weight and Health*

### [Overweight and obesity among Indigenous children: individual and social determinants](#)

“If programs are to change the health behaviours and health outcomes of Indigenous children successfully, they must address social and economic factors—the context in which individual choices are made. Factors influencing obesity are not confined to the health portfolio; policy development should occur across portfolios including housing, education, employment, social welfare and community development.” *Source: Deeble Institute*

### [Vitamin D and Calcium: A Systematic Review of Health Outcomes](#)

“This updated report assesses all outcomes assessed in the original 2009 report (for vitamin D and vitamin D plus calcium) with the exception of outcomes pertaining to body weight and composition and postnatal growth. This report also describes the assay methodologies used in trials included in the original review as well as any newly included studies that report on the effect of vitamin D supplementation on serum 25(OH)D concentrations, to permit a comparison of dose-response outcomes by assay method.” *Source: Agency for Healthcare Research and Quality*

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## **Health Information & Knowledge**

### [Electronic Shared Care Records Elements of Trust](#)

“This review identifies common elements, shared solutions, and how any potential privacy issues have been identified and mitigated [across three existing regional shared care records]. It also makes recommendations about which elements of these and other SCRs should be considered compulsory from a privacy viewpoint.” *Source: New Zealand Privacy Commissioner*

### [Knowledge strategy: harnessing the power of information to improve the public's health](#)

“This document describes the strategic approach to information and knowledge that the public health system needs to take in order to improve and protect public health and reduce inequalities. The knowledge strategy was developed following an extended and open consultation process and incorporates responses from local government, national organisations and key partners.” *Source: Public Health England*

### [Framework for Australian clinical quality registries](#)

“In Australia there is limited capacity to measure and monitor the degree to which health care benefits the patient and how closely that care aligns with evidence-based practice. Currently, only a small number of data collections capture and report process and outcomes data for specific clinical conditions or interventions. This results in significant gaps in current Australian health information regarding the appropriateness and effectiveness of specific healthcare interventions. The

development of national clinical quality registries is a cost-effective way of addressing these gaps.”  
*Source: Australian Commission on Safety and Quality in Health Care*

### [Evidence for Success: The guide to getting evidence and using it](#)

“This guide responds to a demand amongst third sector organisations for guidance on how to use evidence to influence policy and practice.” *Source: Knowledge Translation Network*

### [An ethnographic study of knowledge sharing across the boundaries between care processes, services and organisations: the contributions to ‘safe’ hospital discharge](#)

“The study shows how hospital discharge does not occur as a single or isolated event, but rather through a complex series of situations and opportunities for knowledge sharing. However, these situations vary according to a number of key factors, such as the range of people involved, the types of resources they have access to and the level of leadership. The study also shows that stakeholders perceive a wide range of threats to safe discharge associated with falls, medicines, infection, clinical procedures, equipment, timing and scheduling, and communication. Drawing upon this research evidence, the report develops lessons for policy-makers and service leaders to support knowledge sharing, especially between health and social care agencies, and thereby mitigate system complexity and promote discharge safety.” *Source: National Institute for Health Research*

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## Surgery

### [Good Surgical Practice](#)

“Good surgical practice sets out standards for all surgeons and their practice. It has been developed in consultation with members and fellows, patients, surgical royal colleges and surgical specialty associations and reflects the profession’s expectation of all competent surgeons.” *Source: Royal College of Surgeons*

### [Emergency surgery policy briefing](#)

“This briefing sets out the main challenges facing emergency surgery, and the high-level actions the Government and other policy-makers can take to support patients who require emergency surgical care.” *Source: Royal College of Surgeons*

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## Global Health

### [Global Health Strategy: 2014 to 2019](#)

“In this document [the authors] set out PHE’s approach to global health for the next five years, and provide a framework for international engagement. It is ambitious in its reach, recognising the globalised nature of public health work and the need for strategic engagement in multiple ways and in many areas. The approach outlined affects everyone who works in public health, at home and abroad. We care about global health and are committed to its improvement.” *Source: Public Health England*

### [Investing in Global Health Systems: Sustaining Gains, Transforming Lives](#)

“An IOM study looked at how health systems improvements can lead to better health, reduce poverty, and make donor investment in health sustainable. The resulting report stresses the importance of the health system in making transformative investments that support health in developing countries, and outlines a broad donor strategy that can make effective use of the United States’ comparative advantage in science and technology to improve health for the world’s most vulnerable people.”

*Source: Institute of Medicine*

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### [The Influence of Global Environmental Change on Infectious Disease Dynamics: Workshop Summary](#)

“The twentieth century witnessed an era of unprecedented, large-scale, anthropogenic changes to the natural environment. Understanding how environmental factors directly and indirectly affect the emergence and spread of infectious disease has assumed global importance for life on this planet.”

*Source: National Institute of Medicine*

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**[Global Diabetes Scorecard: Tracking Progress for Action](#)**

“The Scorecard contains the views of IDF’s Member Associations on how far their national governments have progressed by December 2013 and sets the baseline for future monitoring.”

Source: *International Diabetes Federation*

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