



Ministry of Health Library

Grey Matter

A Collection of Recent NGO, Think Tank, and International Government Reports

Issue 65, 2019, January

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 identify 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.

[Mental Health & Wellbeing](#)

[Workforce](#)

[Nutrition, Physical Activity, & Obesity](#)

[Health of Older People](#)

[Health Systems, Costs, & Reform](#)

[Equity](#)

[Health Information & Technology](#)

[Drug Use](#)

[Health Quality & Safety](#)

[Child, Youth, & Maternal Health](#)

[Family Violence](#)

[Disability & Social Care](#)

Mental Health & Wellbeing

[NGO adult mental health and addiction workforce: 2018 survey of secondary care health services](#)

"In 2018, Te Pou and Matua Raki surveyed 232 NGOs about their workforce. The purpose was to estimate the size, composition and turnover of the NGO workforce delivering

secondary care adult mental health and addiction services. The findings are compared to the previous (2014) More than numbers survey.” *Source: Te Pou*

[Are we making a difference in the lives of New Zealanders - how will we know?: A wellbeing measurement approach for investing for social wellbeing in New Zealand](#)

“The Social Investment Agency (SIA) is developing a new approach to analyse the impact of social services on the wellbeing of New Zealanders. This can help funders, providers and others understand whether these services are making a genuine and lasting difference to people’s lives, and inform better decisions about where to focus effort to improve people’s wellbeing. This working paper explores the SIA’s approach to measuring wellbeing and notes the work of other government agencies.” *Source: Social Investment Agency*

[Health matters: reducing health inequalities in mental illness](#)

“People with severe and enduring mental illness are at greater risk of poor physical health and reduced life expectancy compared to the general population. This edition of Health Matters sets out the scale of the problem and presents actions that local areas can take to reduce health inequalities, improve physical health and life chances of people living with mental illness. Although the focus is on adults with more severe and enduring mental illness, many of the actions will be of benefit to all people experiencing mental illness.” *Source: Public Health England*

[Modernising the Mental Health Act](#)

“There is an increasing and welcome recognition in society today of the importance of poor mental health and its consequences for those who battle such challenges, their families and society. At the same time concerns have arisen about the nature of the care received by those with mental illness, and in particular about the rising levels of coercion within mental health services. This Review is a consequence of these concerns, and tries to address them.” *Source: Independent Review of the Mental Health Act 1983 (UK)*

[Accessibility and quality of mental health services in rural and remote Australia](#)

“The accessibility and quality of mental health services in rural and remote Australia, with specific reference to: the nature and underlying causes of rural and remote Australians accessing mental health services at a much lower rate; the higher rate of suicide in rural and remote Australia; the nature of the mental health workforce; the challenges of delivering mental health services in the regions; attitudes towards mental health services; opportunities that technology presents for improved service delivery; and any other related matters.” *Source: Senate Community Affairs References Committee (Australia)*

[Treatment and support for personality disorder: A summary of research by SANE Australia](#)

“The National Mental Health Commission (NMHC) funded SANE Australia’s research into what helps in the treatment of personality disorder, and what services and supports are available across Australia. SANE’s research also involved speaking with people living with personality disorder and their carers. Participants explored what they found helpful and challenging on their recovery journey.” *Source: SANE Australia*

[Back to top](#)

Nutrition, Physical Activity, & Obesity

[Testing ‘nudges’ to encourage walking for short transport trips](#)

“Change to Walking tested the effectiveness of specific ‘nudges’ to encourage walking for short trips to train stations and primary schools, over a six-week period between early May and late June 2018. The program was a pilot behaviour change initiative funded by VicHealth and delivered through Victoria Walks in five locations across Melbourne and regional Victoria.” *Source: VicHealth (Australia)*

[The economic case for investment in walking](#)

“Walking is an indication of a city’s liveability, vibrancy, and health. In Victoria, walking accounts for 1 in 6 weekday trips, and is the most popular recreational activity with over a million participants a year. Despite its potential to deliver significant benefits to cities and people, walking is typically overlooked in planning and investment decisions – most likely due to its routine nature.” *Source: Victoria Walks*

[Incentives and physical activity](#)

“The findings of this study suggest that incentivising physical activity to tackle inactivity and a sedentary lifestyle can lead to better activity levels. When more unhealthy individuals take up an incentive of this kind, the results can lead on average to a more pronounced behaviour change than we see in already relatively more active and healthy individuals. This is important when designing health promotion programmes.” *Source: RAND*

[Assessing cost-effectiveness of obesity prevention policies in Australia](#)

“The current obesity epidemic in Australia and around the globe has significant negative health and economic consequences. Addressing this problem will require a comprehensive societal response, including implementation of a suite of multi-sectoral government policies. Informed government action requires reliable comparative evidence on the costs and benefits of various policy options. ACE-Obesity Policy is a priority-setting study that aimed to evaluate the economic credentials of a range of obesity prevention policies (including both regulatory and program-based interventions), across multiple sectors and multiple areas of governance (local, state and federal governments, and the private sector).” *Source: ACE-Obesity Policy*

[Back to top](#)

Health Systems, Costs, & Reform

[Blueprint for Complex Care](#)

“Across the US, pioneering health care organizations are testing promising new models of care for individuals with complex medical, behavioral, and social needs. Many of these activities occur in isolation, however, with little opportunity for innovators to learn from each other and advance best practices collectively. The Blueprint for Complex Care provides a strategic plan to support these innovations and accelerate opportunities to improve care for individuals with complex health and social needs.” *Source: Institute for Healthcare Improvement*

[Leadership in integrated care systems \(ICSs\)](#)

“The NHS Leadership Academy commissioned SCIE to undertake this research to further expand the understanding of systems leadership and leadership of integrated care systems. The research will inform the Leadership Academy’s long-term plans for supporting leaders in integrated care systems.” *Source: Social Care Institute for Excellence*

[The role of volunteers in the NHS: views from the front line](#)

“This report was commissioned by Royal Voluntary Service and Helpforce in July 2018. Its intention is to ascertain the perceptions of frontline NHS staff working in acute care about the operational pressures they face, how they understand the roles and value of volunteers and what gaps there are that volunteers could help fill. The report sets out the findings from a survey, series of semi-structured interviews and a non-systematic literature review.” *Source: The King’s Fund*

[Understanding the new commissioning system in England: contexts, mechanisms and outcomes](#)

“This research aimed to assess the impact of the reforms on the operation and outcomes of the commissioning system.” *Source: Policy Research Unit in Commissioning and the Healthcare System*

[International health data comparisons 2018](#)

“The interactive data visualisations in this web report allow for comparison of the most recent data from 36 Organisation for Economic Co-Operation and Development (OECD) member countries, across a range of health and health care indicators, with a focus on Australia’s international performance.” *Source: Australian Institute of Health and Welfare*

[Implementing Quality Measures for Accountability in Community-Based Care for People with Serious Illness](#)

“In an effort to better understand and facilitate discussions about the challenges and opportunities related to identifying and implementing quality measures for accountability purposes in community-based serious illness care, the National Academies of Sciences, Engineering, and Medicine held a public workshop on April 17, 2018, in Washington, DC. Workshop participants explored the current state of quality measurement for people with serious illness, their families, and caregivers, with the aim of identifying next steps toward effectively implementing measures to drive improvement in the quality of community-based care for those facing serious illness. This publication summarizes the presentations and discussions from the workshop.” *Source: National Academies Press*

[Back to top](#)

Health Information & Technology

[Our data-driven future in healthcare: people and partnerships at the heart of health related technologies](#)

“New data-driven technologies, powered by novel ways of linking and analysing patient data, are set to transform the way that health and social care is delivered as well as the ways in which we manage our own health. Technologies such as wearable devices, mobile apps and intelligent monitoring devices that use machine learning, provide an opportunity for the NHS to harness the breadth and depth of patient data that it holds to support a healthier future for

patients and the public. This report outlines a set of principles based on our dialogues with patients, the public and healthcare professionals, for the development, evaluation and deployment of data-driven technologies in healthcare.” *Source: The Academy of Medical Sciences (UK)*

[Robotics in social care](#)

“Using robotics has been suggested as one way to help improve the quality of UK social care and manage increasing pressures on services. This POSTnote describes robotic technology and outlines the main ways it has been developed for use in social care. It reviews evidence on the impact of robotics on the costs and quality of social care and its workforce, and explores the main ethical, social, and regulatory challenges to its use in social care.” *Source: Parliamentary Office of Science & Technology (UK)*

[The Future of Surgery](#)

“The Commission on the Future of Surgery gazed twenty years into the future to identify advances in medicine and technology that are likely to change surgical care. [The commission] analysed evidence and assessed the implications of such developments for patients, the surgical profession and the healthcare system.” *Source: Royal College of Surgeons (UK)*

[Handbook on designing and implementing an immunisation information system](#)

“Immunisation information systems (IIS) are confidential, population-based, computerised information systems that record, store, and provide access to consolidated individual immunisation information. The full potential of IIS lies in their ability to better support vaccination programme monitoring by providing access to a large set of data on vaccination. The handbook proposes strategies that build on the experiences of IIS experts; provides case studies from actual programmes to highlight particular aspects of IIS practice, including functionalities, benefits, challenges, and implementation.” *Source: European Centre for Disease Prevention and Control*

[Back to top](#)

Health Quality & Safety

[Learning from adverse events report 2017–18](#)

“This is the annual adverse events report published by the Health Quality & Safety Commission. The report covers adverse events reported by New Zealand's 20 district health boards (DHBs) and other providers. Adverse events (previously referred to as serious and sentinel events) are events which have generally resulted in harm to patients. This report details adverse events in DHBs in the year 1 July 2017 to 30 June 2018.” *Source: Health Quality & Safety Commission (New Zealand)*

[Framework for Effective Board Governance of Health System Quality](#)

“The IHI Lucian Leape Institute’s research scan on board governance of health system quality, evaluation of governance education in quality, and expert interviews made it clear that board members, and those who support them, desire a clear and consistent framework to guide governance of all dimensions of quality beyond safety, including identification of the

core processes and necessary activities for effective governance of quality.” *Source: Institute for Healthcare Improvement*

[The economics of patient safety in primary and ambulatory care](#)

“Building on published patient safety research literature, this paper aims to broaden the existing knowledge base on safety lapses occurring in primary and ambulatory care settings.” *Source: OECD*

[Back to top](#)

Family Violence

[Every 4 minutes: A discussion paper on preventing family violence in New Zealand](#)

“This is a discussion paper on what New Zealand can do to prevent family violence. It takes the position that family violence is a solvable problem. Family violence can be seen as largely a “symptom” of underlying social and psychological issues, that are indeed multiple and complex, but are associated with many of the drivers of other social concerns. In the end, there is a lot to be gained for New Zealand by the unleashing of the social and economic wellbeing of children, families, communities, businesses, and services that would follow the reduction or elimination of emotional, physical, sexual, and psychological violence that tangle and restrain our homes and our relationships.” *Source: Office of the Prime Minister’s Chief Science Advisor*

[Is methamphetamine use associated with domestic violence?](#)

“There is considerable evidence of the impact of methamphetamine use on violent behaviour. This paper presents findings from a review of existing research on the association between methamphetamine use and domestic violence.” *Source: Australian Institute of Criminology*

[Back to top](#)

Workforce

[Advancing medical professionalism](#)

“Advancing medical professionalism argues for understanding and advancing professionalism as one way to support doctors to find joy and satisfaction throughout a career. Professionalism is more than a lofty ideal; it encompasses who doctors are, how they work and what they value. It is writ large every day in the decisions doctors make, the way they treat their colleagues and patients, and the way they view themselves.” *Source: Royal College of Physicians (UK)*

[Never too busy to learn: how the modern team can learn together in the busy workplace](#)

“This publication explores how ‘invitational’ learning environments can be created in clinical settings and, in doing so, poses two key questions: How do we create learning opportunities in the clinical workplace? How do we maximise the impact of these opportunities?” *Source: Royal College of Physicians (UK)*

[Back to top](#)

Health of Older People

[New models of home care](#)

“Some innovative models and approaches to commissioning and delivering home care are emerging. This report explores those new approaches and considers their potential to provide care that is more closely aligned with what people want.” *Source: The King’s Fund*

[Help at home: use of assistive technology for older people](#)

“More people are living longer with complex conditions and needs. Technology can help people to stay living well and safely at home as they get older. But technology is changing rapidly and it can be challenging to get the right technology for the right person with the right support. There has been considerable investment recently in developing and evaluating assistive technologies for older people. But this is a relatively new field and there are important gaps in what we know. This review presents a selection of recent research on assistive technology for older people funded by The National Institute for Health Research (NIHR) and other government funders.” *National Institute for Health Research (UK)*

[How do people access and experience home adaptations? Perspectives from people in later life and practitioners](#)

“This report summarises the findings from recent research conducted on the lived experiences of home adaptations, funded by the Centre for Ageing Better. It draws on the views of both people in later life and practitioners to explore the home adaptations journey, including triggers, access, installation and outcomes.” *Source: Housing LIN (UK)*

[Back to top](#)

Equity

[Tuku iho, tuku iho : culture in Māori health service provision](#)

“This publication provides critical understanding of the notion of culture, cultural safety, cultural competency and cultural fluency especially central to Māori health service provision in Aotearoa. Interspersed within this account, supportive of the sourced literature, are experiences and research which enunciate a clarity of understanding through both a Māori voice and Māori worldview.” *Source: Te Rau Matatini*

[Health literacy for people-centred care - Where do OECD countries stand?](#)

“In the 21st century care, the old paradigm “because the doctor said so” no longer holds. Individuals are now seeking ways to understand their health options and take more control over their health decisions. But this is not an easy task. Professionals continue to use medical jargon, drug instructions are not always clear, and health information in clinical settings continue to be complex and challenging to navigate. Widespread access to digital technologies offset some of these barriers by democratising access to health information, providing new ways to improve health knowledge and support self care. Nonetheless, when health information is misused or misinterpreted, it can wrongly influence individuals’ preferences and behaviour, jeopardise their health, or put unreasonable demands on health systems.” *Source: OECD*

[Back to top](#)

Drug Use

[The global state of harm reduction 2018](#)

“In 2008, Harm Reduction International (HRI) released the first Global State of Harm Reduction, a report that mapped responses to drug-related HIV, viral hepatitis and tuberculosis (TB) around the world for the first time. The data gathered for the report provided a critical baseline against which progress could be measured in terms of the international, regional and national recognition of harm reduction in policy and practice. Since 2008, the biennial report has become a key publication for researchers, policymakers, civil society organisations, UN agencies and advocates, mapping harm reduction policy adoption and programme implementation globally.” *Source: Harm Reduction International*

['Not allowed to be compassionate': chronic pain, the overdose crisis, and unintended harms in the US](#)

“This report presents the challenges faced by chronic pain patients in obtaining appropriate care. It examines how the US government’s legitimate efforts to address the opioid epidemic have contributed to unintended but serious harm, and fallen short of its responsibilities to address the needs of individuals taking opioid medicines for chronic pain. It is based on 86 interviews with chronic pain patients, healthcare providers and officials and reviews of relevant state and federal laws, regulations and clinical guidelines related to chronic pain management and opioid prescribing.” *Source: Human Rights Watch*

[Back to top](#)

Child, Youth, & Maternal Health

[Evidence-based early years intervention](#)

“Early intervention is a loosely-defined term that refers to taking action to resolve problems as soon as possible, before they become more difficult to reverse. In this Report, [the authors] consider early intervention in relation to childhood adversity and trauma, to tackle the potential long-term problems that those who encounter such experiences are more likely to encounter.” *Source: House of Commons Science and Technology Committee (UK)*

[A place to grow: Exploring the future health of young people in five sites across the UK](#)

“A place to grow is the second report in the Health Foundation’s Young People’s Future Health Inquiry and is the result of engagement with over 600 young people aged 16–24 years from five distinct areas across the UK. This report marks the next step in our inquiry, investigating some of the key issues impacting young people’s transition into adulthood.” *Source: Health Foundation*

[Back to top](#)

Disability & Social Care

[Stories of aftercare services and support needs after leaving care: a snapshot from the Stories of Resourcing and Resourcefulness project](#)

“Many young people who leave out-of-home care (OOHC) struggle to access the resources they require for independent living. Young people who have been in OOHC should have access to the kinds of supports available to young people who have not been in care and should have the same life opportunities as their peers. Understanding how to better resource these young people is essential to improving their wellbeing. Drawing on biographical narrative interviews with 22 young people, this snapshot presents preliminary findings on young people’s experiences of accessing services after leaving OOHC.” *Source: Social Policy Research Centre (University of New South Wales)*

[Developing and maintaining person centred active support](#)

“This project aimed to explore the applicability of Active Support in supported accommodation services for people with neurotrauma, and the effectiveness of this model of staff practice in improving quality of life outcomes for this group. It is an initial step in building an evidence base about the types of staff practices, team work, and practice leadership that contribute to good quality of life outcomes for people with neurotrauma living in supported accommodation.” *Source: Living with Disability Research Centre (LaTrobe)*

[Now is the time: supporting disabled children and their families](#)

“This report provides qualitative evidence on the experiences of families raising a disabled child and identifies some of the barriers in early years which can prevent disabled children fulfilling their potential. It draws on interviews with parents of disabled children and an analysis of survey data to examine current and historical attitudes towards disability.”
Source: SCOPE (UK)

[Back to top](#)

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