



Ministry of Health Library

Knowledge for health

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

Issue 31, 2016, March

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.

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Health Systems, Costs, and Reform

[How high-need patients experience the health care system in nine countries](#)

"This analysis uses data from the Commonwealth Fund 2014 International Health Policy Survey of Older Adults to investigate health care use, quality, and experiences among high-need patients in nine countries compared with other older adults." *Source: Commonwealth Fund*

[Behavioural insights in health care: Nudging to reduce inefficiency and waste](#)

“The use of nudge-type interventions in health care is still relatively new, although emerging evidence suggests that they have potential to improve efficiency of health care services if suitably applied. However, the evidence available is highly variable in terms of quality, relevance to health care and behaviour change impact. While nudge-type interventions hold much promise, it is important that interventions clearly build on existing research and theory. If not then nudging in health care is more likely to contribute to inefficiency and waste than reduce it.” *Source: Health Foundation*

Primary Care Providers' Views of Recent Trends in Health Care Delivery and Payment

“A new survey from The Commonwealth Fund and The Kaiser Family Foundation asked primary care providers—physicians, nurse practitioners, and physician assistants—about their experiences with and reactions to recent changes in health care delivery and payment. Providers’ views are generally positive regarding the impact of health information technology on quality of care, but they are more divided on the increased use of medical homes and accountable care organizations. Overall, providers are more negative about the increased reliance on quality metrics to assess their performance and about financial penalties.”

Source: Commonwealth Fund

Operational productivity and performance in English NHS acute hospitals:

Unwarranted variations

“This review looked at productivity and efficiency in English non-specialist acute hospitals, which account for half of the total health budget, using a series of metrics and benchmarks to enable comparison.” *Source: UK Government*

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Health Technology

Delivering the benefits of digital health care

“This report sets out the possibilities to transform health care offered by digital technologies, with important insight about how to grasp those possibilities and benefits from those furthest on in their digital journey.” *Source: Nuffield Trust*

Mitochondrial Replacement Techniques: Ethical, Social, and Policy Considerations

“The final report, Mitochondrial Replacement Techniques: Ethical, Social, and Policy Considerations, provides an ethical analysis of ethical, social, and policy issues surrounding MRT. While significant ethical, social, and policy considerations are associated with MRT, the most germane of these issues can be avoided through limitations on the use of MRT or are blunted by meaningful differences between the heritable genetic modification introduced by MRT and heritable genetic modification of nDNA. Therefore, the committee concluded that it is ethically permissible to conduct clinical investigations of MRT. To ensure that clinical investigations of MRT were performed ethically, however, certain conditions and principles would need to govern the conduct of clinical investigations and potential future implementation of MRT.” *Source: National Academies Press*

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Health Research

[Using Research Evidence: A Practice Guide](#)

Nesta has “created this guide to point you on the right path to finding what evidence might help you. It should help to build your confidence in understanding and using research, and to think about how you might go on to evaluate your own work.” *Source: Nesta*

[Monitoring change in health care through statistical process control methods](#)

“The ability to detect real change in the way care is being delivered will be critical over the next few years as the NHS faces probably its greatest financial challenge. Using information in the right way will be especially important if managers and policy-makers are to make the right decisions about the impacts that new models of care are having... The methods described in this research report are not new and to many clinicians and analysts they are well known, yet they are still relatively uncommon as a means for monitoring change across health systems.” *Source: Nuffield Trust*

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Cancer and Palliative Care

[International Agency for Research on Cancer: the first 50 years, 1965–2015](#)

“This book, published to mark the 50th anniversary of the establishment of the International Agency for Research on Cancer (IARC) by the World Health Assembly in May 1965, introduces the reader to the origins and development, major research themes, and key scientific and public health contributions of IARC in its first 50 years of activity.” *Source: IARC*

[End of Life Care: Helping people to be cared for and die at home](#)

“Drawing on the Housing LIN’s knowledge of the sector and with input from its network members, it looks at the importance of end of life care delivered at home, describing the context, inequalities in end of life care, and examples of good or emerging practice. It is intended to be a practical guide for those working in mainstream and/or specialist housing, care and support, and public health to understand their respective roles, and how they may work with each other and with the wider health care system, to help people to have their end of life care wishes met.” *Source: Housing Learning and Improving Network*

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Mental Health

[The Five Year Forward View for Mental Health](#)

“The independent Mental Health Taskforce has brought together health and care leaders, people using services and experts in the field to create a Five Year Forward View for Mental Health for the NHS in England. This national strategy, which covers care and support for all ages, was published in February 2016 and signifies the first time there has been a strategic approach to improving mental health outcomes across the health and care system, in partnership with the health arm’s length bodies.” *Source: NHS England*

[Megatrends impacting the mental wellbeing of young Victorians](#)

“The Bright Futures report raises questions about how Victoria can educate and prepare young people to be resilient and adaptable in a world characterised by decreasing job

security, the fluidity of globalisation and technology, increasingly diverse societies and over-exposure to the internet.” *Source: VicHealth*

Mental Health and Housing

“The report identifies which types of supported accommodation successfully meet the needs of people with mental health problems and draws on the expertise of people living and working in these settings across England to capture the issues on the ground.” *Source: Mental Health Foundation UK*

A review of nature-based interventions for mental health care

“Nature-based interventions are operating throughout the UK, working with a wide range of vulnerable groups helping to positively benefit health and wellbeing outcomes. These nature-based interventions (also called green care and ecotherapy) could be part of a new solution for mental health care. However increasing awareness and access to these interventions is challenging given the number of organisations delivering nature-based projects and services, the variety of terms and language used to describe their activity and benefits and the variation in delivery models which use different impact measures. This research seeks to explore these issues and set out the steps required to enable a greater number of nature-based interventions to be commissioned in mental health care.” *Source: Natural England*

Beyond the Fragments: Preventing the Costs and Consequences of Chronic Physical and Mental Diseases

“This paper is part of an Australian Health Policy Collaboration series outlining the compelling evidence about the challenges of making our health systems fit for 21st century conditions. It has a very specific focus on the needs of people with chronic and complex conditions which often involve concurrent physical and mental health problems.” *Source: Australian Health Policy Collaboration*

Adverse Community Experiences and Resilience: A Framework for Addressing and Preventing Community Trauma

“This report offers a groundbreaking framework for understanding the relationship between community trauma and violence. Until now, there has been no basis for understanding how community trauma undermines both individual and community resilience, especially in communities highly impacted by violence, and what can be done about it. Funded by Kaiser Permanente Community Benefit in Northern California, and based on interviews with practitioners in communities with high rates of violence, the report outlines specific strategies to address and prevent community trauma—and foster resilience—using techniques from those living in affected areas.” *Source: Prevention Institute*

Trauma-informed care in child/family welfare services

“In addition to evidence-based programs or clinical interventions that are specific to addressing trauma symptoms, such as trauma-focused cognitive behaviour therapy, there is a need for broader organisational- or service-level systems of care that respond to the needs of clients with a lived experience of trauma that go beyond a clinical response. Some of the challenges identified in implementing and embedding trauma-informed care across services and systems are discussed.” *Source: Australian Institute of Family Studies*

[Old problems, new solutions: improving acute psychiatric care for adults in England: final report](#)

“Access to acute care for severely ill adult mental health patients is inadequate nationally and, in some cases, potentially dangerous. There are major problems both in admissions to psychiatric wards and in providing alternative care and treatment in the community. These two sets of problems are intimately connected and need to be tackled together. There are, nevertheless, many good services around the country and enormous scope for dramatically improving others. These are old problems but there is a great deal to build on and new opportunities for innovation.” *Source: The Commission to review the provision of acute inpatient psychiatric care for adults*

[Measuring Specific Mental Illness Diagnoses with Functional Impairment: Workshop Summary](#)

“The report discusses existing measures and data on mental disorders and functional impairment, challenges associated with collecting these data in large-scale population-based studies, as well as study design and estimation options.” *Source: National Academies Press*

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Nutrition, Physical Activity, and Obesity

[Meeting the Dietary Needs of Older Adults: Workshop in Brief](#)

“On October 28–29, 2015, the National Academies of Sciences, Engineering, and Medicine Food and Nutrition Board convened a workshop in Washington, DC, to examine factors in the physical, social, and cultural environment that affect the ability of older adults to meet their daily dietary needs. The workshop built on two previous Institute of Medicine (IOM) workshop summaries, Providing Healthy and Safe Foods as We Age (IOM, 2010) and Nutrition and Healthy Aging in the Community (IOM, 2012).” *Source: National Academies Press*

[Enhancing Coherence between Trade Policy and Nutrition Action](#)

“This discussion paper opens up space for constructive dialogue on the relationship between trade policy and nutrition. It shows that the links between trade policies and actions designed to address malnutrition are complex and generate considerable controversies.” *Source: United Nations System Standing Committee on Nutrition*

[The Best Start in Life: A manifesto for physical activity in the early years](#)

“The 'Best Start in Life' by the British Heart Foundation National Centre for Physical Activity sets out four key themes for policy makers to ensure every child has access to high quality physical activity opportunities from birth. Within the manifesto they are asking policy makers to embed early years physical activity into physical activity policy nationally, regionally and locally to ensure physical activity is supported across the UK at home, in early years settings and in the community.” *Source: British Heart Foundation*

[Carbonating the World: The Marketing and Health Impact of Sugar Drinks in Low- and Middle-income Countries](#)

“With this report, the Center for Science in the Public Interest contributes to the efforts of this movement by unveiling the marketing strategies of Big Soda in countries from Mexico to

Ghana to Indonesia and by highlighting efforts being made around the world to regulate the products. This is a victory in progress that will protect consumers the world over.” *Source: Center for Science in the Public Interest*

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Disability and Social Care

[Social Action Partners: peer support for children and young people with intellectual disability and their families in Victoria](#)

“The project’s findings have policy implications for children, young people and parents’ access to self-directed support options in the future; their control over managing their support; how to better cater to information needs; the importance of peer support, information sharing and opportunities for discussion in developing capacity for self-directed support; and the need to focus decisions about support arrangements on the aspirations of children and young people.” *Source: Social Policy Research Centre UNSW*

[Final Evidence Review for Autism Spectrum Disorder in Young Children: Screening](#)

The Agency for Healthcare Research and Quality (AHRQ) “systematically reviewed the evidence about benefits and harms of routine screening for ASD in primary care settings.” *Source: AHRQ*

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Child, Youth, and Maternal Health

[The future of child health services: new models of care](#)

“Different services and models of care for children and young people have been emerging around the UK, both within the Vanguard scheme and inspired by it. These models are emerging in response to a series of problems in current services for children and young people. This briefing describes the current state of child health and quality of care in the UK and how the emerging models are responding to these issues.” *Source: Nuffield Trust*

[Improving outcomes of maternity services in England: A Five Year Forward](#)

“The NHS England commissioned review – led by independent experts and chaired by Baroness Julia Cumberlege – sets out wide-ranging proposals designed to make care safer and give women greater control and more choices.” *Source: NHS England*

[Resilience for the Digital World: Research into children and young people’s social and emotional wellbeing online](#)

“The evidence outlined in this important review by Ecorys demonstrates the very real impact that the digital world can have on young people’s mental health and wellbeing.” *Source: Young Minds*

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Public Health

[CMO Alcohol Guidelines Review: A summary of the evidence of the health and social impacts of alcohol consumption](#)

“This document provides an overview on the evidence of the health and social impacts of alcohol consumption mapped against the terms of reference of the Expert Group.” *Source: Centre for Public Health Liverpool John Moores University*

Drink Wise, Age Well: Alcohol Use and the Over 50s in the UK

“This report demonstrates that there is a pressing need for action to reduce alcohol-related harm in older adults across the UK. This first State of the Nation Report from the Drink Wise, Age Well programme is a comprehensive overview of alcohol and ageing today; how much older adults drink, and why they might drink. One major issue identified in this report is the lack of understanding and knowledge in relation to units and recommended alcohol guidelines.” *Source: Drink Wise, Age Well*

The Chief Public Health Officer’s Report on the State of Public Health in Canada 2015: Alcohol Consumption in Canada

“This report focuses on alcohol consumption at the population level in Canada, in order to raise awareness of the evidence regarding health risks. Canadians take health risks every day. Behaviours like how physically active people are, how many servings of fruit and vegetables or how much salt and fat is in the food people eat and how much alcohol people consume can all carry some degree of health risk.” *Source: Public Health Agency of Canada*

Sunlight exposure: risks and benefits

“This NICE Guideline covers how to communicate the risks and benefits of natural sunlight exposure (specifically, the ultraviolet rays UVA and UVB) to help people understand why they may need to modify their behaviour to reduce their risk of skin cancer and vitamin D deficiency.” *Source: National Institute for Health and Care Excellence*

Clinical care for survivors of Ebola virus disease: Interim guidance

“Today, there are over 10 000 survivors of Ebola virus disease. A number of medical problems have been reported in survivors, including mental health issues. Ebola virus may persist in some body fluids, including semen. Ebola survivors need comprehensive support for the medical and psychosocial challenges they face and also to minimize the risk of continued Ebola virus transmission. WHO has developed this document to guide health services on how to provide quality care to survivors of Ebola virus disease.” *Source: WHO*

Every breath we take: the lifelong impact of air pollution

“The report starkly sets out the dangerous impact air pollution is currently having on [the UK’s] health. Each year in the UK, around 40,000 deaths are attributable to exposure to outdoor air pollution which plays a role in many of the major health challenges of our day. It has been linked to cancer, asthma, stroke and heart disease, diabetes, obesity, and changes linked to dementia. The health problems resulting from exposure to air pollution have a high cost to people who suffer from illness and premature death, to our health services and to business. In the UK, these costs add up to more than £20 billion every year. The report also highlights the often overlooked section of our environment - that of indoor space. Factors such as, kitchen products, faulty boilers, open fires, fly sprays and air fresheners, all of which can cause poor air quality in our homes, workspaces and schools. As a result the report offers a number of major reform proposals setting out what must be done...to tackle the problem of air pollution.” *Source: Royal College of Physicians*

[Family Violence Death Review Committee Fifth Report: January 2014 to December 2015](#)

“The focus of this report is on changing the narrative about family violence in Aotearoa New Zealand... This report encourages practitioners and policy makers to transform the way we collectively think about family violence.” *Source: Health Quality & Safety Commission*

[Health Star Rating Monitoring and Evaluation](#)

“The Health Star Rating (HSR) is a new voluntary front-of-pack labelling system developed for use in New Zealand and Australia. It takes the guesswork out of reading nutrition labels and allows consumers to make better informed, healthier choices quickly and easily when comparing similar packaged foods.” *Source: Health Promotion Agency*

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Health of Older People

[Tomorrow’s World: The Future of Ageing in the UK](#)

“Using data featured in the expert testimony delivered at the 2015 Future of Ageing conference, this report describes the future challenges and opportunities posed by an ageing population. What might the future of ageing look like? Will we live longer, healthier and wealthier lives, or will there be too little for too many?” *Source: International Longevity Centre – UK*

[Active Ageing and the Built Environment](#)

“Drawing on the Housing LIN’s knowledge of the sector and with input from its network members, it looks at active ageing and the different aspects of the built environment that can promote and sustain it, with examples of good and emerging practice and resources for further information. It is intended for those working in social housing, local government, and the care and support sectors to understand their roles in developing and maintaining a built environment that contributes to active ageing.” *Source: Housing Learning and Improving Network*

[Advanced dementia practice model: understanding and transforming advanced dementia and end of life care](#)

“This report sets out an integrated and comprehensive, evidence-based approach to supporting people living with advanced dementia wherever they are. Advanced dementia presents a range of complex health issues in addition to the social and psychological impact of the illness. Whilst the distinctions between the different illnesses of dementia will diminish as a result of the progressed condition, experience of advanced illness will be influenced by a range of factors unique to each person. The Advanced Dementia Practice Model honours the human rights of those living with advanced dementia and provides a bio-psychosocial approach in responding to the individual experience.” *Source: Alzheimer Scotland*

[The right medicine: improving care in care homes](#)

“The Royal Pharmaceutical Society (RPS) believes it is time to change the way medicines are used in care homes. Too many care home residents are taking medicines which are doing them more harm than good. At a time when every pound of NHS resource needs to be scrutinised, [the RPS] believe that a far more efficient system would have one pharmacist,

as part of a multidisciplinary team, responsible for the whole system of medicines and their use within a care home.” *Source: The Royal Pharmaceutical Society*

[First WHO Ministerial Conference on Global Action Against Dementia](#)

“This report follows the ‘First Ministerial Conference on Global Action Against Dementia’; organized by the World Health Organization (WHO) with support from the Department of Health of the United Kingdom and the Organisation for Economic Co-operation and Development (OECD). The First WHO Ministerial Conference on Global Action Against Dementia fostered awareness of the public health and economic challenges posed by dementia, a better understanding of the roles and responsibilities of Member States and stakeholders, and led to a “Call for Action” supported by the conference participants.”

Source: WHO

[Measuring the age-friendliness of cities: a guide to using core indicators](#)

“This framework gives an overview of the different phases and dimensions of a coordinated effort to improve the age-friendliness of a city, and eventually to improve the health and wellbeing of an ageing urban population.” *Source: WHO*

[Dementia in the Family: The impact on carers](#)

“The research shines a light on the reality of living with dementia, both for the person with the condition and those who often sacrifice personal well-being to ensure their loved one gets the best care they can provide.” *Source: Alzheimer’s Research UK*

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Person-Centred Care

[At the heart of health: realising the value of people and communities](#)

“Person- and community-centred approaches for health and wellbeing have significant potential to improve outcomes for individuals, support the development of strong and resilient communities and, over time, help reduce demand on formal health and social care services. There is evidence from both research and practice to demonstrate the benefits of person- and community-centred approaches.” *Source: Nesta*

[Person-centred care in Europe: a cross-country comparison of health system performance, strategies and structures](#)

“Despite the international prominence of the concept of person centred care, practice and policy in different nations is not always well publicised, and there have been few attempts to compare and contrast the way in which the principles of person centred care are being adopted and advanced in different jurisdictions. This briefing provides an overview of health systems performance and strategies in person-centred care in Europe.” *Source: Picker Europe*

[Rules of Engagement: Lessons from Panorama](#)

“Rules of Engagement: Lessons from PANORAMA serves as an excellent resource for health providers and professionals, outlining key moments in the engagement process that require extra thought and preparation. These recommendations can help ensure that patient

engagement initiatives deliver results for organizations, and also make participants feel valued and respected in the process.” *Source: The Change Foundation*

[Striving for Excellence in Patient Relations Processes in Ontario’s Hospitals](#)

“This document is an at-a-glance review of patient relations best practices, providing a step-by-step approach to driving improvement in patient relations... It includes examples of patient relations innovations and recommendations from Ontario and from other jurisdictions, both within Canada and abroad.” *Source: Health Quality Ontario*

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Workforce

[Assessing Progress on the Institute of Medicine Report: The Future of Nursing](#)

“In 2010, the Institute of Medicine (IOM) released the report *The Future of Nursing: Leading Change, Advancing Health*, which made a series of recommendations pertaining to roles for nurses in the new health care landscape. This current report assesses progress made by the Robert Wood Johnson Foundation/AARP Future of Nursing: Campaign for Action and others in implementing the recommendations from the 2010 report and identifies areas that should be emphasized over the next 5 years to make further progress toward these goals.” *Source: National Academies Press*

[Review of Family Medicine Within Rural and Remote Canada: Education, Practice, and Policy](#)

“Through a literature review, using both peer and grey literature, and informal discussions with national and international rural education experts, this background paper aims to uncover the realities taking place in Canada, as well as the lessons that can be learned from the experiences in other jurisdictions, such as Australia, in their approach to rural medical education for family physicians. This paper is not meant to be a systematic literature review, as many have been conducted in recent years. It builds upon the good work conducted by others who have brought their knowledge to bear on the study of rural medical education. As a focused synthesis, this background paper aims to identify opportunities for action.” *Source: College of Family Physicians of Canada*

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Quality and Safety

[The Global Trigger Tool: A Review of the Evidence](#)

“Trigger tools, particularly the IHI GTT, assist organisations to measure and monitor harm. They appear to be the most accurate and efficient method to identify AEs. Further work is needed to assess their reliability and validity. Trigger tools are most effective when combined with other measures and patient safety interventions in the reduction of iatrogenic harm.” *Source: Health Quality & Safety Commission*

[How can frontline expertise and new models of care best contribute to safely reducing avoidable acute admissions? A mixed-methods study of four acute hospitals](#)

“Hospital emergency departments are becoming more crowded every year, with higher numbers of accident and emergency (A&E) visits, and pressures on staff and beds. The

Avoidable Acute Admissions (3A) study looked at four hospitals in South West England, focusing on how decisions were made about admission and discharge. Researchers observed ways of working, measured patients' waiting times and talked to professionals, patients and carers about their experiences." *Source: National Institute for Health Research*

[Improving quality in the English NHS: A strategy for action](#)

"Despite a succession of well-meaning policy initiatives over the past two decades, the paper argues that the NHS in England has lacked a coherent approach to improving quality of care. It describes key features of a quality improvement strategy and the role of organisations at different levels in realising it, offering 10 design principles to guide its development. A quality improvement strategy of this kind has never been implemented at such a scale and the challenge in doing so is immense – yet the paper argues that the NHS has no real alternative." *Source: King's Fund*

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