# Minisrty of Health Grey Matter.

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

Issue 39, 2016, November

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?subject=I%20would%20like%20to%20subscribe%20to%20Grey%20Matter.) to subscribe.

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## Health of Older People

### [Sweden’s Esther Model: Improving Care for Elderly Patients with Complex Needs](http://www.commonwealthfund.org/publications/case-studies/2016/sep/~/media/files/publications/case-study/2016/sep/1901_gray_esther_case_study_v3.pdf)

“Jönköping County in Sweden focused on improving care coordination and the experiences of elderly patients through the “Esther model.” This case study describes the model and summarizes available evidence about its impact based on published materials and interviews with program leaders in Jönköping and Stockholm.” *Source: Commonwealth Fund*

### [Future of an ageing population](https://www.gov.uk/government/publications/future-of-an-ageing-population)

“This report brings together evidence about today’s older population, with future trends and projections, to identify the implications for the UK. This evidence will help government to develop the policies needed to adapt to an ageing population.” *Source: UK Government Office for Science*

### [Inequalities in Mental Health, Cognitive Impairement and Dementia Among Older People](http://www.instituteofhealthequity.org/projects/inequalities-in-mental-health-cognitive-impairement-and-dementia-among-older-people/inequalities-in-mental-health-cognitive-impairement-and-dementia-among-older-people.pdf)

“This report focuses on inequalities in the experience and prevalence of poor mental health, cognitive impairment and dementia and the impact of social isolation, lack of mental stimulation and physical activity, before and after retirement, and in later old age. These issues can exacerbate the risks of poor mental health, cognitive impairment and dementia in later life and are experienced disproportionately by people in lower socio economic groups.” *Source: UCL Institute of Health Equity*

### [World Alzheimer Report 2016: Improving healthcare for people living with dementia](https://www.alz.co.uk/research/WorldAlzheimerReport2016.pdf)

“This World Alzheimer Report 2016 reviews the state of healthcare for dementia around the world, and recommends ways that it can be improved. There is a clear and urgent need to improve the coverage of healthcare around the world, for people living with dementia now and those who will be in the future.” *Source: Alzheimer’s Disease International*

### [Making a Difference in Dementia: Nursing Vision and Strategy](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/554296/Dementia_nursing_strategy.pdf)

“The Making a Difference in Dementia: Nursing Vision and Strategy, published in March 2013, set out our vision of how nurses could maximise their unique contribution to high quality, compassionate care and support for people with dementia and their carers/families.” *Source: Department of Health (UK)*

### [After the Liverpool Care Pathway Study: Rules of Thumb for End of Life Care for People with Dementia](http://www.kcl.ac.uk/sspp/policy-institute/scwru/pubs/2016/reports/RuleOfThumb-Sept16-2nd.pdf)

“End of life care guidance for people with dementia is lacking and this has been made more problematic in England with the removal of one of the main end of life care guidelines which offered some structure, the Liverpool Care Pathway. This guidance gap may be eased with the development of heuristics (rules of thumb) which offer a fast and frugal form of decision-making.” *Source: King’s College London*

### [Creating Age-Friendly Cities](http://researchbriefings.files.parliament.uk/documents/POST-PN-0539/POST-PN-0539.pdf?utm_source=The%20King%27s%20Fund%20newsletters&utm_medium=email&utm_campaign=7622480_NEWSL_HWB_2016-10-24&utm_content=Age%20friendly%20cities%20briefing&dm_i=21A8,4JDJK,FL)

“There is increasing recognition that cities should aim to meet the needs of older people and support them to live actively and participate fully in their communities. This POSTnote examines how housing, outdoor spaces and transport can be made more age-friendly. It also highlights challenges for designing and delivering age friendly cities.” *Source: Parliamentary Office of Science & Technology (UK)*

### [Exploring the aged care use of older people from culturally and linguistically diverse backgrounds: a feasibility study](http://apo.org.au/files/Resource/aihw_20342_wp1_oct_2016.pdf)

“One-third of older Australians are from culturally and linguistically diverse (CALD) backgrounds. Knowing how this population group accesses aged care is a key issue in ensuring equitable and need-appropriate service delivery.” *Source: Australian Institute of Health and Welfare*

### [Aged Care: a quick guide](http://apo.org.au/files/Resource/parliamentarylibrary_agedcare_oct_2016.pdf)

“This quick guide provides a brief overview of aged care in Australia. It describes the types of care provided, arrangements for accessing subsidised care, statistics on aged care, the organisations that provide care, and the regulatory arrangements for ensuring quality care. The quick guide does not describe care that is provided outside of the formal aged care system, such as care provided by family members or accommodation in retirement villages.” *Source: Parliament of Australia*

### [Patient-centered medical homes and the care of older adults](http://www.johnahartford.org/images/uploads/reports/PCMH_Roadmap2016.pdf)

“This important new paper provides a roadmap to guide primary care practices in how to enhance care for older, complex patients and their families.” *Source: John A Hartford Foundation*

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## Nutrition, Physical Activity, & Obesity

### [Assessing Prevalence and Trends in Obesity: Navigating the Evidence](https://www.nap.edu/catalog/23505/assessing-prevalence-and-trends-in-obesity-navigating-the-evidence?utm_source=NAP+Newsletter&utm_campaign=17c8e2d02d-Final_Book_2016_10_03_23505&utm_medium=email&utm_term=0_96101de015-17c8e2d02d-102579513&goal=0_96101de015)

“Assessing Prevalence and Trends in Obesity examines the approaches to data collection, analysis, and interpretation that have been used in recent reports on obesity prevalence and trends at the national, state, and local level, particularly among U.S. children, adolescents, and young adults. This report offers a framework for assessing studies on trends in obesity, principally among children and young adults, for policy making and program planning purposes, and recommends ways decision makers and others can move forward in assessing and interpreting reports on obesity trends.” *Source: National Academies Press*

### [The SHAKE Technical Package for Salt reduction](http://www.who.int/dietphysicalactivity/publications/shake-salt-habit/en/)

“The SHAKE Package has been designed to assist Member States with the development, implementation and monitoring of salt reduction strategies to enable them to achieve a reduction in population salt intake. The SHAKE package outlines the policies and interventions which have been effective in reducing population salt intake, provides evidence of the efficacy of the recommended interventions, and includes a toolkit containing resources to assist Members States to implement the interventions.” *Source: WHO*

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## Child, Youth, & Maternal Health

### [A rapid review of evidence on the cost-effectiveness of interventions to improve the oral health of children aged 0-5 years](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/560972/Rapid_review_ROI_oral_health_5_year_old.pdf)

“This report describes a rapid review of recently published evidence on the cost effectiveness of interventions to improve oral health in children aged 0-5 years.” *Source: Public Health England*

### [User feedback in maternity services](https://www.kingsfund.org.uk/sites/files/kf/field/field_publication_file/User_feedback_maternity_Kings_Fund_Oct_2016.pdf)

“Patient feedback is an important tool for tracking the experience of those who use NHS services and, through this, the quality of care they receive. It also plays a key role in identifying problem areas and shaping service improvements. Maternity services are using a variety of feedback mechanisms, in addition to national tools, to help them understand women’s experience of maternity services.” *Source: King’s Fund*

### [Building safe and strong families: earlier intervention and family support strategy](http://apo.org.au/files/Resource/building_safe_and_strong_families_-_earlier_intervention_and_family_support_strategy.pdf)

“The Department for Child Protection and Family Support has developed the Building Safe and Strong Families: Earlier Intervention and Family Support Strategy in partnership with the community services sector to enable the service system to be more responsive and effective for the most vulnerable families in Western Australia.” *Source: Department for Child Protection and Family Support (WA)*

### [Who are today’s dads? Fathers and co-parents of children in the Growing Up in New Zealand study](https://gallery.mailchimp.com/c4f6b2fca0e12e49c424dea9f/files/Who_are_today_s_dads_2016_UOA_full.pdf)

“Fathers and co-parents play important roles in children’s lives. Who are today’s dads? is a Centre for Longitudinal Research project related to the multidisciplinary, longitudinal study Growing Up in New Zealand.” *Source: University of Auckland*

### [From the First Hour of Life: A new report on infant and young child feeding](https://data.unicef.org/wp-content/uploads/2016/10/From-the-first-hour-of-life.pdf)

“A new global report from UNICEF, From the First Hour of Life: Making the case for improved infant and young child feeding everywhere, provides a global status update on infant and young child feeding practices and puts forth recommendations for improving them. The report is divided into two parts: Part I focuses on breastfeeding and Part II looks at complementary feeding practices. Each part reviews the most recent evidence on infant and young child feeding practices and provides updated global and regional estimates and trends, where available, as well as disaggregated analyses.” *Source: UNICEF*

### [Moving from Evidence to Implementation of Early Childhood Programs](https://www.nap.edu/catalog/23669/moving-from-evidence-to-implementation-of-early-childhood-programs-proceedings?utm_source=NAP+Newsletter&utm_campaign=9bb12352c9-NAP_mail_new_2016_10_25&utm_medium=email&utm_term=0_96101de015-9bb12352c9-102579513&goal=0_96)

“In June 2016, The National Academies of Sciences, Engineering, and Medicine held a workshop titled “Moving from Evidence to Implementation of Early Childhood Development: Strategies for Implementation.” The focus of the workshop was bringing science to practice at scale in order to bridge research to practice in local communities. Also discussed was the critical issue of the implementation of early childhood development programs. Reaching entire populations requires understanding the challenges of implementation at scale and applying the best knowledge available to ensure effective and sustainable delivery to children and their caregivers. This publication summarizes the presentations and discussions from the workshop.” *Source: National Academies Press*

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## Workforce

### [Exploring the Role of Accreditation in Enhancing Quality and Innovation in Health Professions Education](https://www.nap.edu/catalog/23636/exploring-the-role-of-accreditation-in-enhancing-quality-and-innovation-in-health-professions-education)

“Given the rapid changes in society, health, and health care, the National Academies of Sciences, Engineering, and Medicine hosted a workshop in April 2016, aimed to explore global shifts in society, health, health care, and education, and their potential effects on general principles of program accreditation across the continuum of health professional education. Participants explored the effect of societal shifts on new and evolving health professional learning opportunities to best ensure quality education is offered by institutions regardless of the program or delivery platform. This publication summarizes the presentations and discussions from the workshop.” *Source: National Academies Press*

### [A Framework for Educating Health Professionals to Address the Social Determinants of Health](https://www.nap.edu/catalog/21923/a-framework-for-educating-health-professionals-to-address-the-social-determinants-of-health?utm_source=NAP+Newsletter&utm_campaign=56c383afdb-Final_Book_2016_10_18_21923&utm_medium=email&utm_term=0_96101de015-56c383afdb-10)

“The World Health Organization defines the social determinants of health as “the conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life.” These forces and systems include economic policies, development agendas, cultural and social norms, social policies, and political systems. In an era of pronounced human migration, changing demographics, and growing financial gaps between rich and poor, a fundamental understanding of how the conditions and circumstances in which individuals and populations exist affect mental and physical health is imperative. Educating health professionals about the social determinants of health generates awareness among those professionals about the potential root causes of ill health and the importance of addressing them in and with communities, contributing to more effective strategies for improving health and health care for underserved individuals, communities, and populations.” *Source: National Academies Press*

### [Underfunded, underdoctored, overstretched - the NHS in 2016](https://www.rcplondon.ac.uk/news/underfunded-underdoctored-overstretched-nhs-2016?utm_source=Communications&utm_medium=email&utm_campaign=7565594_RCP%20digest%20-%2023%20September%202016&utm_content=UnderfundedReport&dm_i=1V12,4I5NE,BL6P85,GNK60,1)

“Today the Royal College of Physicians launches a stark report on the challenges facing the NHS. The report paints a grim picture of an NHS struggling to cope under the increasing pressure of rising demand and inadequate funding, with resulting workforce pressures threatening patient safety.” *Source: Royal College of Physicians (UK)*

### [Gaining Efficiency: Increasing the Use of Physician Assistants in Canada](http://www.conferenceboard.ca/e-library/abstract.aspx?did=8347)

“This report is funded by the Canadian Association of Physician Assistants to provide insight into the potential time savings if routine tasks were delegated to physician assistants. This would alleviate the pressure that excess demand for care can place on physicians’ time. The report examines the value of PAs as a function of physician time-savings and efficiency gains. Three areas of medical practice for the Canadian context were chosen for economic modelling: primary care, emergency care services, and orthopaedics.” *Source: Conference Board of Canada \*sign up for free account to download*

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## Health Information & Technology

### [Making IT Work: Harnessing the power of health information technology to improve care in England](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/550866/Wachter_Review_Accessible.pdf)

“The National Advisory Group on Health Information Technology in England advises the Department of Health and NHS England about making the secondary care system more digital. The report, ‘Making IT Work: Harnessing the power of health information technology to improve care in England’ details the group’s overall findings and principles and gives 10 implementation recommendations.” *Source: Department of Health (UK)*

### [Exploring Data and Metrics of Value at the Intersection of Health Care and Transportation](https://www.nap.edu/catalog/23638/exploring-data-and-metrics-of-value-at-the-intersection-of-health-care-and-transportation?utm_source=NAP+Newsletter&utm_campaign=2f41027779-NAP_mail_new_2016_10_04&utm_medium=email&utm_term=0_96101de015-2f41027779-10257951)

“Evidence from the public health sector demonstrates that health care is only one of the determinants of health, which also include genes, behavior, social factors, and the built environment. These contextual elements are key to understanding why health care organizations are motivated to focus beyond their walls and to consider and respond in unprecedented ways to the social needs of patients, including transportation needs. In June 2016 the National Academies of Sciences, Engineering, and Medicine held a joint workshop to explore partnerships, data, and measurement at the intersection of the health care and transportation sectors. This publication summarizes the presentations and discussions from the workshop.” *Source: National Academies Press*

### [Understanding statistics in social policy development and evaluation: a quick guide](http://apo.org.au/files/Resource/parliamentarylibrary_understandingstatisticsinsocialpolicydevelopmentandevaluation_sep_2016.pdf)

“This paper attempts to provide some guidance for non-statisticians about the questions they might ask when presented with statistical information in order to assess how much reliance they can put on it. This is not intended to be a comprehensive coverage of the factors to be considered (more detailed references are provided in links and in the further reading), but rather to provide a checklist of some of the more common issues.” *Source: Parliamentary Library Australia*

### [Stepping Up Telehealth: Using telehealth to support a new model of care for type 2 diabetes management in rural and regional primary care](http://aphcri.anu.edu.au/files/Furler-Stepping%20Up%20Telehealth%20Full%20%20Report%20%20FINAL.pdf)

“This project piloted the feasibility and acceptability of a telehealth intervention to enhance care in rural general practice for people with out-of-target Type 2 Diabetes (T2D).” *Source: Australian Primary Health Care Research Institute*

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## Public Health

### [Green Space and Health](http://researchbriefings.files.parliament.uk/documents/POST-PN-0538/POST-PN-0538.pdf?utm_source=The%20King%27s%20Fund%20newsletters&utm_medium=email&utm_campaign=7638985_NEWSL_HMP%202016-10-18&dm_i=21A8,4JQA1,FLWRH5,GVF42,1)

“A range of bodies, including Government agencies, have promoted the possible physical and mental health benefits of access to green space. This POSTnote summarises the evidence for physical and mental health benefits from contact with nature, such as reducing rates of non-communicable diseases, and the challenges for urban green spaces.” *Source: Parliamentary Office of Science & Technology*

### [Attitudes and Behaviour towards Alcohol Survey 2013/14 to 2015/16: Auckland Regional Analysis](http://www.hpa.org.nz/sites/default/files/ABAS%20Auckland%20regional%20analysis_FA.pdf)

“This report presents descriptive results about the alcohol-related behaviours, attitudes and experiences of people aged 15 years and over living in Auckland.” *Source: Health Promotion Agency*

### [The relationship between alcohol outlets and harm](http://www.hpa.org.nz/sites/default/files/The%20relationship%20between%20alcohol%20outlets%20and%20harm.pdf)

“This research examines the relationship between alcohol outlets and social harm measured by Police activity and road traffic crashes. The analysis uses a longitudinal panel data set for the period 2007-2014 covering all of New Zealand.” *Source: Health Promotion Agency*

### [Health Risks of Indoor Exposure to Particulate Matter](https://www.nap.edu/catalog/23531/health-risks-of-indoor-exposure-to-particulate-matter-workshop-summary?utm_source=NAP+Newsletter&utm_campaign=2f41027779-NAP_mail_new_2016_10_04&utm_medium=email&utm_term=0_96101de015-2f41027779-102579513&goal=0_96101de015)

“The EPA’s Indoor Environments Division commissioned the National Academies of Sciences, Engineering, and Medicine to hold a workshop examining the issue of indoor exposure to [particulate matter] more comprehensively and considering both the health risks and possible intervention strategies. Participants discussed the ailments that are most affected by particulate matter and the attributes of the exposures that are of greatest concern, exposure modifiers, vulnerable populations, exposure assessment, risk management, and gaps in the science. This report summarizes the presentations and discussions from the workshop.” *Source: National Academies Press*

### [Ambient air pollution: A global assessment of exposure and burden of disease](http://apps.who.int/iris/bitstream/10665/250141/1/9789241511353-eng.pdf)

“This report presents the updated results of mortality and morbidity attributed to ambient air pollution (also known as ‘burden of disease due to air pollution’). It includes information on the sources of data on air pollution available to the WHO, on the methodology used to estimate human exposure to air pollution and related burden of disease, as well as the actual estimates of human exposure to particulate matter of a diameter less than 2.5 micrometres (PM2.5) for countries and for the globe; and the related national burden of disease attributable to long-term exposure to ambient (outdoor) air pollution for the year 2012.” *Source: WHO*

### [A Breath of Fresh Air: Addressing Climate Change and Air Pollution Together for Health](http://www.ukhealthalliance.org/wp-content/uploads/2016/10/UK-Health-Alliance-A-Breath-of-Fresh-Air-Final-Report.pdf)

“A Breath of Fresh Air, makes the case for much more integrated strategies to address air pollution and climate change. It argues that approaches to addressing both challenges simultaneously will create much greater health benefits and cost-savings than strategies which address them separately.” *Source: UK Health Alliance*

### [Towards environmentally sustainable health systems in Europe. A review of the evidence](http://www.euro.who.int/__data/assets/pdf_file/0012/321015/Towards-environmentally-sustainable-HS-Europe.pdf?ua=1)

“This review provides evidence to illustrate the environmental impact of health systems in Europe, the potential benefits of fostering environmental sustainability in health systems and the barriers to and incentives for such action” *Source: WHO*

### [Action on Cardiovascular Disease: Getting Serious about Prevention](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/556135/Action_on_cardiovascular_disease-getting_serious_about_prevention.pdf)

“This document aims to highlight the ongoing impact of cardiovascular disease, provide an overview of PHE’s wide-ranging work in relation to cardiovascular disease and underline our key role in providing leadership and support to the NHS and wider partners.” *Source: Public Health England*

### [The Chief Public Health Officer's Report on the State of Public Health in Canada 2016: A Focus on Family Violence in Canada](http://www.healthycanadians.gc.ca/publications/department-ministere/state-public-health-family-violence-2016-etat-sante-publique-violence-familiale/alt/pdf-eng.pdf)

“Family violence impacts health beyond just immediate physical injury, and increases the risk for a number of conditions, including depression, anxiety, post-traumatic stress disorder, as well as high blood pressure, cancer and heart disease. Despite the work of many researchers, health care professionals, organizations and communities, we still do not have a good understanding of why family violence happens, nor do we know how best to intervene. This report sheds light on a topic that can be hard to talk about. Family violence often remains hidden. Working together, we can unravel why, when, where, how, and to whom family violence happens and improve our efforts to support healthy Canadian families.” *Source: Public Health Agency of Canada*

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## Mental Health

### [Pasifika adult mental health and addiction workforce: 2014 survey of Vote Health funded services](http://www.tepou.co.nz/uploads/files/resource-assets/more-than-numbers-pasifika-final.pdf)

“This report shares the results of the 2014 More than numbers organisation workforce survey of Vote Health funded adult mental health and addiction services, relating to workforce development strategies for Pasifika. The report can be used to inform workforce planning.” *Source: Te Pou and Le Va*

### [Review of the National Depression Initiative: The Journal and Depression Website](http://www.hpa.org.nz/sites/default/files/Review%20of%20the%20National%20Depression%20Initiative%20-%20The%20Journal%20and%20Depression%20Website.pdf)

“In 2016 the AUT Centre for eHealth completed a review of the online self management tool The Journal and the depression.org.nz.” *Source: Health Promotion Agency*

### [Improving the physical health of adults with severe mental illness: essential actions](http://www.rcpsych.ac.uk/files/pdfversion/OP100.pdf?utm_source=The%20King%27s%20Fund%20newsletters&utm_medium=email&utm_campaign=7668849_NEWSL_HMP%202016-10-28&dm_i=21A8,4KDBL,FLWRH5,GY7ZX,1)

“The physical health of people with severe mental illness (SMI) is significantly worse than the health of the general population. This report recommends practical ways to improve physical healthcare services for people with SMI.” *Source: Academy of Medical Royal Colleges and the Royal Colleges of General Practitioners, Nursing, Pathologists, Psychiatrists, Physicians, the Royal Pharmaceutical Society and Public Health England*

### [Attitudes to mental health problems and mental wellbeing: Findings from the 2015 British Social Attitudes survey](https://gallery.mailchimp.com/c4f6b2fca0e12e49c424dea9f/files/British_social_attitudes_2016.pdf)

“This paper presents new findings on attitudes to mental wellbeing and mental health problems. Levels of life satisfaction are high, and most people have positive attitudes towards improving their own mental wellbeing. However, there are varying levels of acceptance of those with mental health problems, and perceptions of prejudice towards people with these conditions are still widespread.” *Source: Public Health England*

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## Disability & Social Care

### [Knowing you’re not alone: Understanding peer support for stroke survivors](http://www.nuffieldtrust.org.uk/sites/files/nuffield/stroke_association_evaluation_final_web.pdf?utm_source=The%20King%27s%20Fund%20newsletters&utm_medium=email&utm_campaign=7586157_NEWSL_HMP%202016-10-04&dm_i=21A8,4ILIL,FLWRH5,GQ4PB,1)

“Stroke Association Voluntary Groups (SAVGs) are volunteer-led, peer support groups based in local communities across the UK. Through the support they offer, SAVGs aim to improve outcomes for stroke survivors and the people who care for them. The Nuffield Trust was commissioned by the Stroke Association to independently evaluate the impact of the groups.” *Source: Nuffield Trust*

### [Industry Insights: Healthcare & Social Support Services](https://www.westpac.co.nz/assets/Business/Economic-Updates/2016/Bulletins-2016/Industry-Insights-Healthcare-and-Social-Support-Services-October-2016.pdf)

“This report uses a number of data sources including Statistics New Zealand ANZSIC data to show changes in the sector.” *Source: Westpac*

### [The framework for enhanced health in care homes](https://www.england.nhs.uk/wp-content/uploads/2016/09/ehch-framework-v2.pdf?utm_source=The%20King%27s%20Fund%20newsletters&utm_medium=email&utm_campaign=7540584_NEWSL_ICB%202016-10-12&dm_i=21A8,4HMCO,FLWRH5,GTM4A,1)

“The Enhanced Health in Care Homes model is based on a suite of evidence-based interventions, which are designed to be delivered within and around a care home in a coordinated manner in order to make the biggest difference to its residents.” *Source: NHS (UK)*

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## Health Systems, Costs, & Reform

### [Joint Report on Health Care and Long-Term Care Systems & Fiscal Sustainability](http://ec.europa.eu/economy_finance/publications/eeip/ip037_en.htm?utm_source=Communications&utm_medium=email&utm_campaign=7639534_RCP%20digest%20-%2014%20October%202016&utm_content=Joint%20Report%20on%20Health%20Care&dm_i=1V12,4JQPA,BL6P85,GUVM3,1)

“This report, prepared by the staff of the European Commission’s Directorate-General for Economic and Financial Affairs and the Economic Policy Committee (Ageing Working Group), presents policy challenges for health care and long term care, and options on how to contain spending pressures through efficiency gains, in order to ensure fiscally sustainable access to good quality services for all.” *Source: European Commission*

### [Simpler, clearer, more stable: Integrated accountability for integrated care](http://www.health.org.uk/publication/simpler-clearer-more-stable)

“In this paper, Andrew Hudson identifies the principles that should underpin a good accountability framework, and examines how the present arrangements for accountability across health and social care in England could be improved.” *Source: Health Foundation (UK)*

### [Improving the Health of the public by 2040](http://www.acmedsci.ac.uk/download.php?f=file&i=37428)

“Over the coming decades, the UK population will face a wide range of complex health challenges and opportunities, many of which can only be fully addressed through strategies to secure and improve the health of the public as a whole. The Academy’s report, ‘Improving the health of the public by 2040’, explores how to organise [the] research environment to generate and translate the evidence needed to underpin such strategies.” *Source: UK Academy of Medical Sciences*

### [New care models: Emerging innovations in governance and organisational form](https://www.kingsfund.org.uk/sites/files/kf/field/field_publication_file/New_care_models_Kings_Fund_Oct_2016.pdf?utm_source=The%20King%27s%20Fund%20newsletters&utm_medium=email&utm_campaign=7612298_NEWSL_HMP%202016-10-11&dm_i=21A8,4J5OQ,FLWRH5,GS79Q,1)

“This report takes stock of commissioners’ and providers’ emerging approaches to the contracting, governance and other organisational infrastructure of the PACS (Primary and Acute Care System) and MCP (Multispecialty Community Provider) vanguards. *Source: King’s Fund*

### [Exploring Shared Value in Global Health and Safety](https://www.nap.edu/catalog/23501/exploring-shared-value-in-global-health-and-safety-workshop-summary?utm_source=NAP+Newsletter&utm_campaign=2f41027779-NAP_mail_new_2016_10_04&utm_medium=email&utm_term=0_96101de015-2f41027779-102579513&goal=0_96101de015-2f)

“The National Academies of Sciences, Engineering, and Medicine convened a workshop to explore the concept of shared value for global health and safety stakeholders in both the public and private sectors; roles, responsibilities, incentives, and opportunities for different stakeholders engaging in global health and safety initiatives in low- and middle-income countries; and the potential of partnerships and collaboration for improved outcomes for all stakeholders, including the communities they serve. Participants considered potential opportunities for creating shared value for all organizations, specifically the creation and impact of shared value through an organization’s core products and services, through employee health and wellness programs, and through community or population health investments.” *Source: National Academies Press*

### [The future of the NHS: A Proposition Paper Critically Examining the Future of the National Health Service](http://www.good-governance.org.uk/wp-content/uploads/2016/09/Finalversion_The-future-of-the-NHS__MDWWreviewed-1.pdf)

“On the 2nd June 2016, The Good Governance Institute, supported by Sir William Wells, hosted a breakfast seminar, ‘The future of the National Health Service’, to critically examine the future challenges facing the NHS... This paper presents the core arguments arising from the debate and sets out the critical next steps required to safeguard the future sustainability of the health and care system.” *Source: Good Governance Institute*

### [Social Impact Bonds: State of Play and Lessons Learned](https://www.oecd.org/cfe/leed/SIBs-State-Play-Lessons-Final.pdf)

“Social Impact Bonds (SIBs) have spread around the globe in the past five years. At a time of pressure on public budgets following the economic crisis, a financing mechanism for social policies that promises to mitigate the public sector risk, increase effectiveness and pay for services now while requiring public contributions later, is likely to attract attention. Few policy tools have been disseminated so far and so fast... This paper sets out to explore the current state of play of SIBs.” *Source: OECD*

### [Understanding Social Impact Bonds](http://web.archive.org/web/20161003014420/http:/www.oecd.org/cfe/leed/UnderstandingSIBsLux-WorkingPaper.pdf)

The report’s “main objective is to raise awareness and provide information about some of Social Impact Bond’s main features and challenges and inform policy making. In terms of methodology, this document is based on a literature review and discussions with a number of experts.” *Source: OECD*

### [Diagnosing corruption in healthcare](http://apo.org.au/files/Resource/transparencyinternational_diagnosingcorruptioninhealth_oct_2016.pdf)

“Information collected from a literature review, key informant interviews, and a survey with healthcare professionals was used to identify the main corruption types in the healthcare sector and provide contextual information on the profile for each type. The result is 37 corruption types organised into eight areas of a health system. This report offers an overview of the findings from the project.” *Source: Transparency International*

### [The Social Value Difference in Health and Care Commissioning](http://socialenterprise.org.uk/uploads/editor/files/Publications/SocialValueDifference_Health_SEUK2016final.pdf?utm_source=The%20King%27s%20Fund%20newsletters&utm_medium=email&utm_campaign=7648874_NEWSL_HMP%202016-10-21&dm_i=21A8,4JXWQ,FLWRH5,GWA1P,1)

“This short report details the difference social value can make in health and care commissioning, and shares learning for other commissioning authorities to make the most of social value.” *Source: Social Enterprise UK*

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## Reducing Inequalities

### [Indigenous Insight II - Inspiring Innovation - Kaupapa Māori Models of Practice](https://gallery.mailchimp.com/c4f6b2fca0e12e49c424dea9f/files/Indigenous_Insights_TRM_2016.pdf)

“Indigenous Insights II provides a selection of stories which shares some of the struggles and achievements amongst six people who were willing to courageously share their own kōrero or the kōrero of their whānau member to provide hope to others.” *Source: Te Rau Matatini*

### [Community wellbeing from the ground up](http://bcec.edu.au/assets/090285-BCEC-Research-Yawuru-Report-Launch-Program_Lorraine.pdf)

“For Yawuru people, mabu liyan is at the heart of what it is to have and to know a good life. Using mabu liyan as the foundation, the Yawuru Wellbeing Project has sought to understand wellbeing in the context of Yawuru culture, the historical and contemporary challenges faced by Yawuru people and the strengths and capabilities of Yawuru. This report outlines the development of Yawuru wellbeing indicators from the ground up, working with the Yawuru in Broome. In doing so, the report’s research findings prioritise the voices and inputs of Yawuru women and men in the conception and measurement of wellbeing.” *Source: Curtin University*

### [Integrating best practice and filling knowledge gaps in remote Aboriginal diabetes detection and care - Improving case detection and service delivery](http://aphcri.anu.edu.au/files/Marley-Diabetes_case_detection_and_care-FullReportFINAL.pdf)

“During discussions with clinic and management staff, barriers and enablers to implementing a new screening protocol using HbA1c testing were determined. The project also conducted a clinical systems and software/data quality needs assessment at participating sites, documenting strategies to improve diabetes programs and monitoring short term changes resulting from the audit.” *Source: Australian Primary Health Care Research Institute*

### [Framing the Dialogue on Race and Ethnicity to Advance Health Equity](https://www.nap.edu/catalog/23576/framing-the-dialogue-on-race-and-ethnicity-to-advance-health-equity?utm_source=NAP+Newsletter&utm_campaign=1625555648-NAP_mail_new_2016_10_18&utm_medium=email&utm_term=0_96101de015-1625555648-102579513&goal=0_96101de015-16)

“In February 2016, the National Academies of Sciences, Engineering, and Medicine held a workshop in which speakers shared strategies for individuals, organizations, and communities to advance racial and health equity. Participants discussed increasing awareness about the role of historical contexts and dominant narratives in interpreting data and information about different racial and ethnic groups, framing messages for different social and political outcomes, and readying people to institutionalize practices, policies, and partnerships that advance racial and health equity. This publication serves as a factual summary of the presentations and discussions from the workshop.” *Source: National Academies Press*

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## Primary Care

### [The organisation of out-of-hours primary care in OECD countries](http://www.oecd-ilibrary.org/social-issues-migration-health/the-organisation-of-out-of-hours-primary-care-in-oecd-countries_5jlr3czbqw23-en)

“Out-of-hours (OOH) services provide urgent primary care when primary care physician (PCP) offices are closed, most often from 5pm on weekdays and all day on weekends and holidays. Based on a policy survey (covering 27 OECD countries) and the existing literature, the working paper describes the current challenges associated with the organisation of OOH primary care and reviews the existing models of delivering OOH primary care. The paper pays particular attention to policies which have been pursued to improve access and quality of OOH primary care.” *Source: OECD*

### [Experiencing integration: A pilot study of consumer and provider experiences of integrated primary health care](http://aphcri.anu.edu.au/files/Experiencing%20integration-Full%20Report%20FINAL.pdf)

“This study provided important insights into if and how integrated primary health care works from the perspectives of both consumers and providers. It pilot tested methods of qualitative and quantitative research into consumer experiences of integrated primary health care in a single-site health care service.” *Source: Australian Primary Health Care Research Institute*

### [A proof of concept study to identify familial hypercholesterolaemia in primary care](http://aphcri.anu.edu.au/files/Brett%20Full%20report%20FINAL.pdf)

“This study examined the feasibility (acceptability, usefulness, convenience and cost) of using a new method of detecting hypercholesterolaemia through GP clinics. If the condition was found following a fasting pathology test, close relatives were also checked. This family tracing identified new patients with the condition as they stood to benefit most from early treatment. The proposed new approach will allow the condition to be managed by the patient’s GP with support from the hospital specialist.” *Source: Australian Primary Health Care Research Institute*

### [An implementation pilot study of "The Change Program" – a GP-delivered weight loss program for adults in primary care](http://aphcri.anu.edu.au/files/Sturgiss-Full%20report%20FINAL.pdf)

“This pilot study aimed to evaluate the feasibility of a GP-delivered weight management program for overweight and obese adults in primary care. The project team received both qualitative and quantitative feedback from participating GPs and their patients regarding the usefulness, practicality and implementation of the program that was developed.” *Source: Australian Primary Health Care Research Institute*

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## Secondary Care

### [Understanding patient flow in hospitals](http://www.nuffieldtrust.org.uk/sites/files/nuffield/publication/understanding_patient_flow_in_hospitals_web_3.pdf)

“This briefing lays out how greater speed through a system often requires more space. Looking at trusts that meet the four hour target and those furthest from meeting it, it estimates that at least 5.5% of beds need to be free for the standard to be met. Yet many hospitals are unable to provide this much of the time, making target breaches inevitable.” *Source: Nuffield Trust*

### [Targeting zero: supporting the Victorian hospital system to eliminate avoidable harm and strengthen quality of care](http://apo.org.au/files/Resource/s_duckett_hospital_safety_and_quality_assurance_in_victoria_2016.pdf)

“The review was a detailed and extensive analysis into how the Department of Health & Human Services oversees and supports quality and safety of care across the Victorian hospital system. It consulted widely, seeking the views and experiences of patients, clinicians, hospital managers and boards about how to make Victoria's healthcare systems safer. It highlights cases of excellence and success that have not been shared across the health system as a missed opportunity to strengthen state-wide systems and better protect patients.” *Source: Department of Health (Vic)*

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