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

Issue 25, 2015, September

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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## Quality & Safety

### [Improving Root Cause Analyses and Actions to Prevent Harm](https://c.ymcdn.com/sites/npsf.site-ym.com/resource/resmgr/PDF/RCA2_first-online-pub_061615.pdf)

The purpose of this document is to ensure that efforts undertaken in performing RCA2 willresult in the identification and implementation of sustainable systems-based improvementsthat make patient care safer in settings across the continuum of care.” *Source: National Patient Safety Institute*

### [Safely home: What happens when people leave hospital and care settings?](http://www.healthwatch.co.uk/sites/healthwatch.co.uk/files/170715_healthwatch_special_inquiry_2015_1.pdf)

“When discharge goes wrong, it comes at significant cost, both to individuals and to the health and social care system.” *Source: Healthwatch England*

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## Inequalities

### [Inequalities in life expectancy: Changes over time and implications for policy](http://www.kingsfund.org.uk/sites/files/kf/field/field_publication_file/inequalities-in-life-expectancy-kings-fund-aug15.pdf)

This report “sets out recent thinking and evidence on what determines our health, as individuals and as communities, and how this translates into inequalities in health.” *Source: King’s Fund*

### [Rio Political Declaration on Social Determinants of Health: A Snapshot of Canadian Actions 2015](http://healthycanadians.gc.ca/publications/science-research-sciences-recherches/rio/alt/rio2015-eng.pdf)

“The purpose of this report is to showcase Canada's recent actions that contribute to the advancement of the Rio Political Declaration on Social Determinants of Health (Rio Declaration), a non-binding pledge which calls on World Health Organization Member States to improve/influence the working and living conditions that affect health and well-being.” *Source: Government of Canada*

### [Health Literacy: Past, Present, and Future](http://www.nap.edu/catalog/21714/health-literacy-past-present-and-future-workshop-summary?utm_source=NAP+Newsletter&utm_campaign=10ae82ea8d-NAP_mail_new_2015_08_18&utm_medium=email&utm_term=0_96101de015-10ae82ea8d-102579513&goal=0_96101de015-10ae82ea8d-102579513&mc_cid=10ae82ea8d&mc_eid=887bc22fe0)

“To commemorate the anniversary of the release of the 2004 health literacy report, the Institute of Medicine's Roundtable on Health Literacy convened a 1-day public workshop to assess the progress made in the field of health literacy over the past decade, the current state of the field, and the future of health literacy at the local, national, and international levels. Health Literacy: Past, Present, and Future summarizes the presentation and discussion of the workshop.” *Source: Institute of Medicine \*sign up for free account to download*

### [Spatial variation in Aboriginal and Torres Strait Islander peoples access to primary health care](http://www.aihw.gov.au/WorkArea/DownloadAsset.aspx?id=60129551600)

“The report shows that overall, Australian Government funded Indigenous-specific primary health-care services appear to be well positioned relative to the geographic distribution of Aboriginal and Torres Strait Islander people and to the distribution of other GP services. However, there are a number of areas where Aboriginal and Torres Strait Islander people have very limited access to both Indigenous-specific services and GP services in general.” *Source: Australian Institute of Health and Welfare*

### [A critical review of the capability approach in Australian Indigenous policy](http://apo.org.au/files/resources/centre_for_aboriginal_economic_policy_research/56910-a_critical_review_of_the_capability_approach_in_australian_indigenous_policy.pdf)

“This paper reviews the contestation between capability scholars and commentators on Indigenous policy, paying particular attention to four areas: human capability vs human capital, deficit discourse, individual responsibility, and the ends and means of policy. Finally, to reinvigorate the capability approach in Australian Indigenous policy, six areas are suggested in which the capability approach could be used in the future.” *Source: Centre for Aboriginal Economic Policy Research*

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## Workplace Wellness

### [The impact of physical environments on employee wellbeing](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/454175/20150318_-_Physical_Environments_-_V3.0_FINAL.pdf)

“This report provides an overview of the literature around the impact of particular elements of the physical work environment on employee wellbeing, specifically the office layout, office furniture, workplace lighting and temperature and employee control over their work environment. All of these factors should be considered in order to ensure that the physical characteristics of the work environment do not have a detrimental effect on engagement, productivity and wellbeing.” *Source: Public Health England*

### [Measuring employee productivity](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/454172/20150318_-_Productivity_-_V3.0_FINAL.pdf)

“This report provides an overview of the literature on productivity and specifically the different ways in which it can be measured. This is important given the limitations of using sickness absence data as a proxy for staff health and wellbeing, which provides only a very partial picture. The links between wellbeing and productivity are also presented in order to highlight the impact of employees with poor physical and mental wellbeing in the workplace. Following on from this, the issue of presenteeism at work is presented – that is, turning up to work while ill – focusing on its links with productivity and the importance of the issue in the modern day workforce.” *Source: Public Health England*

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## Child, Youth, & Family

### [State of Care 2015](http://www.occ.org.nz/assets/Publications/OCC-State-of-Care-2015.pdf)

“The Children's Commissioner today released the first State of Care report. State of Care 2015 is an annual summary from our independent monitoring of Child, Youth and Family’s policies, practices and services. It includes feedback from children and young people about their experiences in the system.” *Source: New Zealand Children’s Commissioner*

### [Specialist family violence services: the heart of an effective family violence system](http://apo.org.au/files/Resource/dv_vic_submission_to_the_royal_commission_-_specialisation.pdf)

“This submission argues that an effective response to family violence must be built on a strong, stable policy platform and, critically, appropriate, reliable and dedicated funding commensurate to need.” *Source: Domestic Violence Victoria*

### [Listen to us: using the views of WA Aboriginal and Torres Strait Islander children and young people to improve policy and service delivery](http://www.ccyp.wa.gov.au/files/Aboriginal%20consultation%202014/Listen%20To%20Us/Listen%20To%20Us%20-%20Final%20-%20Web%20PDF%20-%20August%202015.PDF)

“The purpose of this report is to add to the current body of evidence by emphasising what Aboriginal children and young people see as important and using their views as inspiration to increase the effectiveness of programs and services that support their wellbeing.” *Source: Commissioner for Children and Young People Western Australia*

### [Evaluation of the face to face service: Using a solution focused approach with children or young people in care or on the edge of care](http://www.nspcc.org.uk/globalassets/documents/research-reports/face-to-face-final-evaluation-report.pdf)

“Face to Face is a new service that offers support to all children and young people aged 5–18 who are in care, or those who are very worried about how they get along with family members. The Face to Face workers talk to children and young people about the things they would like to change in their life. They help them work out what needs to happen to make things better, both now and in the future. The National Society for the Prevention of Cruelty to Children did some research to find out what these children and young people thought of the service.” *Source: National Society for the Prevention of Cruelty to Children*

### [Achieving emotional wellbeing for looked after children: A whole system approach](http://www.nspcc.org.uk/globalassets/documents/research-reports/achieving-emotional-wellbeing-for-looked-after-children.pdf)

“Looked after children are approximately four times more likely to have a mental disorder than children living in their birth families. This report explores the causes of poor mental health among looked after children and considers how services in local areas can work together to promote good emotional wellbeing for looked after children.” *Source: National Society for the Prevention of Cruelty to Children*

### [Family Resilience](http://www.superu.govt.nz/sites/default/files/In%20Focus%20Family%20Resilience%202015.pdf)

“Many families cope successfully with difficult situations and can adapt according to their circumstances. What is it about these families that enables them to cope, and even thrive, despite the odds? This paper looks at the capacity of families to respond and adapt as situations arise.” *Source: Social Policy Evaluation and Research Unit*

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## Public Health

### [Global Public Health System Innovations: A Scan of Promising Practices](http://www.academyhealth.org/files/AH2015GlobalPublicHealthReport.pdf)

“The initiatives chosen for this study represent innovations in high, medium, and low-resource regions in Africa, Asia, North and South America, and Europe… Although each innovation was unique, interviews with key leaders, participants, and stakeholders revealed that those implementing the projects and programs faced common challenges and experienced similar factors that facilitated their progress.” *Source: Academy Health*

### [Regional Framework for Implementation of the Global Vaccine Action Plan in the Western Pacific](http://iris.wpro.who.int/bitstream/10665.1/10921/1/9789290617099_eng.pdf)

"In 2012, the World Health Assembly endorsed the Global Vaccine Action Plan 2011–2020. The plan details strategies and activities to achieve the Decade of Vaccines vision. Their shared mission is to extend – by 2020 and beyond – the full benefits of immunization to all people, regardless of where they are born, who they are or where they live. This Regional Framework for Implementation of the Global Vaccine Action Plan in the Western Pacific guides national immunization programmes to fulfil this mission." *Source: WHO*

### [Antimicrobial stewardship: systems and processes for effective antimicrobial medicine use](http://www.nice.org.uk/guidance/ng15/resources/antimicrobial-stewardship-systems-and-processes-for-effective-antimicrobial-medicine-use-1837273110469)

“This guideline covers the effective use of antimicrobials (including antibiotics) in children, young people and adults. It aims to change prescribing practice to help slow the emergence of antimicrobial resistance and ensure that antimicrobials remain an effective treatment for infection.” *Source: National Institute for Health and Care Excellence*

### [E-cigarettes: an evidence update](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/457102/Ecigarettes_an_evidence_update_A_report_commissioned_by_Public_Health_England_FINAL.pdf)

“The role and impact of electronic cigarettes has been one of the great debates in public health in recent years and [Public Health England] commissioned this independent review of the latest evidence to ensure that practitioners, policy makers and, most importantly of all, the public have the best evidence available.” *Source: Public Health England*

### [Creating Places That Promote Physical Activity: Perceiving is Believing](http://activelivingresearch.org/sites/default/files/ALR_Review_Perceptions_Aug2015_0.pdf)

“The design and maintenance of neighborhoods, streets, and parks, and people’s perceptions of those places based on qualities such as aesthetic appeal and perceived safety, can affect physical activity in youth and adults. Adults and children prefer to visit and spend time in appealing places (those that include certain physical features, such as natural elements, good upkeep, unobstructed vistas, sidewalks and seating) and avoid unappealing places. This review examines the evidence on perceived aspects of places that affect preference, and may attract children to be physically active.” *Source: Active Living Research*

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## Health of Older People

### [How can and should UK society adjust to dementia?](http://www.jrf.org.uk/sites/files/jrf/society-adjust-dementia-summary.pdf)

“The publication explores the application of the social model of disability to dementia. It looks in detail at what this social model is, and where it has come from, bringing together the authors’ interests in disability and ageing, and training in disability studies and health and social geography.” *Source: Joseph Rowntree Foundation*

### [Dementia friendly communities: Guidance for councils](http://www.local.gov.uk/documents/10180/7058797/L15-238+Dementia+friendly+communities+guidance+for+councils/7acaa658-329e-4aa1-bdff-ef6a286dd373?utm_source=The+King%27s+Fund+newsletters&utm_medium=email&utm_campaign=6008438_HMP+2015-08-07&dm_i=21A8,3KS52,FLWRH5,CUFIP,1)

“This guidance looks at current best practice and learning in the creation of dementia friendly communities, how it fits within the broader policy landscape, and what actions councils can take, and are already taking.” *Source: UK Local Government Association*

### [The impact of primary care quality on inpatient length of stay for people with dementia: An analysis by discharge destination](https://www.york.ac.uk/media/che/documents/papers/researchpapers/CHERP113_primary_care_quality_LoS_dementia_discharge.pdf)

“As part of a national scheme known as the Quality and Outcomes Framework (QOF), GPs are rewarded for providing an annual review for patients with dementia. In the review, the GP checks the patient’s physical and mental health, and the support needs of the patient and carer. The GP also ensures services are coordinated across different parts of the system, e.g. that the patient is linked to community mental health services who can support them at home after a hospital stay. So does the QOF dementia review help achieve timely discharge from hospital?” *Source: Centre for Health Economics, University of York*

### [What developments in the built environment will support the adaptation and ‘future proofing’ of homes and local neighbourhoods so that people can age well in place over the life course, stay safe and maintain independent lives?](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/445583/gs-15-11-future-ageing-homes-neighbourhoods-er21.pdf)

“This paper examines whether current housing and neighbourhoods meet the needs of an ageing population. It also looks ahead 25 years to identify what developments are needed to help people to stay in their communities and maintain independent lives.” *Source: Government Office for Science*

### [Village Life: Independence, Loneliness, and Quality of Life in Retirement Villages with Extra Care](http://www.ilcuk.org.uk/images/uploads/publication-pdfs/Village_Life_ILC-UK_Report.pdf)

“This striking research revealed that village living can promote greater independence and provide greater choice in planning for later life than would otherwise be available. The research shows that the communal environment has the potential to reduce social isolation, particularly for residents who move from more rural or remote homes.” *Source: International Longevity Centre UK*

### [Changes in vision in older people: causes and impact](http://www.pocklington-trust.org.uk/Resources/Thomas%20Pocklington/Documents/PDF/Research%20Publications/rf-49-changes-in-vision-in-older-people-elsa-3.pdf)

“This publication summarises findings from research commissioned by Thomas Pocklington Trust that uses the English Longitudinal Study of Ageing (ELSA) to look at the links between development of visual impairment and older peoples’ social and economic position, and the impact of both deteriorating and improving sight on key aspects of their lives.” *Source: Thomas Pocklington Trust*

### [Preventing dementia: A provocation](http://www.ilcuk.org.uk/images/uploads/publication-pdfs/ILC_Dementia_and_Prevention.pdf)

“The authors of the report have modelled the impact of matching best practice interventions from global case studies on reducing six risk factors for dementia.” *Source: International Longevity Centre UK*

### [Dementia today and tomorrow: A new deal for people with dementia and their carers](http://www.hsj.co.uk/Journals/2015/02/19/a/a/w/Dementia-Today-and-Tomorrow.pdf)

“Dementia today and tomorrow: A new deal for people with dementia and their carers has been produced by the Deloitte UK Centre for Health Solutions and Alzheimer’s Society. The report presents the outcome of a series of events and initiatives aimed at collecting the views of people with an interest in continuing to drive improvements in services for people with dementia and those caring for them.” *Source: Alzheimer’s Society*

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## Cancer & Palliative Care

### [Essential elements for safe and high-quality end-of-life care](http://www.safetyandquality.gov.au/wp-content/uploads/2015/05/National-Consensus-Statement-Essential-Elements-forsafe-high-quality-end-of-life-care.pdf)

“The purpose of this National Consensus Statement: essential elements for safe and high-quality end-of-life care (the Consensus Statement) is to describe the elements that are essential for delivering safe and high-quality end-of-life care in Australia. The Consensus Statement sets out suggested practice for the provision of end-of-life care in settings where acute care is provided.” *Source: Australian Commission on Safety and Quality in Health Care*

### [Care and communication between health professionals and patients affected by severe or chronic illness in community care settings: a qualitative study of care at the end of life](http://www.journalslibrary.nihr.ac.uk/__data/assets/pdf_file/0010/149662/FullReport-hsdr03310.pdf)

“Advance care planning (ACP) is a process whereby patients, in discussion with health professionals and family members, make plans for their own future health care, based on what they would like to happen if they become unable to make decisions for themselves. Little is known about how ACP is carried out, or how it affects patients’ and families’ experience of death and dying. This study investigated when and how patients, family carers and health professionals communicate with each other about ACP for patients who are seen to be approaching the end of their life.” *Source: National Institute for Health Research*

### [Exploring the attitudes and behaviours of older people living with cancer](http://www.macmillan.org.uk/Documents/Campaigns/AttitudesofolderpeoplelivingwithcancerAugust15.pdf)

“Between January and June 2015, Ipsos MORI Social Research Institute carried out a study on behalf of Macmillan Cancer Support to better understand how patient attitudes influence the outcomes of older people living with cancer. This research examines the patient attitudes and behaviours that can impact on cancer treatment and patient experience, which in turn, may affect clinical and non-clinical outcomes.” *Source: Macmillan Cancer Support*

### [The PIPER Project: An Internal Examination of Colorectal Cancer Management in New Zealand](https://www.fmhs.auckland.ac.nz/assets/fmhs/sms/ctnz/docs/THE%20PIPER%20PROJECT%20Final%20deliverable%20report%207%20August%202015%20%28HRC%2011_764%20FINDLAY%29.pdf)

“[The authors] detail actual patient presentation, diagnosis, treatment and management data for a national cohort of CRC patients, including description of variations resulting from differences in ethnicity, location of residence and socioeconomic status.” *Source: University of Auckland*

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## Primary & Integrated Care

### [IRISS on...place-based working](http://www.iriss.org.uk/sites/default/files/iriss-on-placebasedworking-08-2015.pdf)

“This edition of IRISS ON... explores how a place-based approach enables effective work with people and communities to improve their health and wellbeing through asset-based, locally embedded, cross-sector working.” *Source: Institute for Research and Innovation in Social Services*

### [The future of primary care: Creating teams for tomorrow](http://hee.nhs.uk/wp-content/blogs.dir/321/files/2015/07/The-future-of-primary-care.pdf)

“The Commission’s vision for the future of the primary care workforce is drawn from the people [the authors] have met, the evidence [they] have read, [their] professional experience and, perhaps most of all, from the innovative examples of primary care [they] saw across the country.” *Source: Primary Care Workforce Commission*

### [New organisational models of primary care to meet the future needs of the NHS: a brief overview of recent reports](http://hee.nhs.uk/wp-content/blogs.dir/321/files/2015/07/Literature-overview-from-RAND-Europe.pdf)

“The Health Education England Primary Care Workforce Commission has set out to identify innovative models of primary care that will meet these future challenges. As part of this work, RAND Europe was commissioned to present a brief overview of reports from professional bodies and policy-focused organisations – from England and internationally – that describe new models for delivering primary care.” *Source: RAND Europe*

### [Reconsidering accountability in an age of integrated care](http://www.nuffieldtrust.org.uk/sites/files/nuffield/publication/viewpoint_accountability_integration.pdf)

“In a viewpoint paper authored for the Nuffield Trust, Ben Jupp, Visiting Senior Fellow and former director of public service reform at the Cabinet Office, examines the future of governance and accountability in the NHS and social care amid the rise of new provider models, a growing focus on integration and deep cuts in council funding.” *Source: Nuffield Trust*

### [Integration and continuity of primary care: polyclinics and alternatives - a patient-centred analysis of how organisation constrains care co-ordination](http://www.journalslibrary.nihr.ac.uk/__data/assets/pdf_file/0009/151101/FullReport-hsdr03350.pdf)

“The researchers note that “combining general practice and community health services into one organisation is likely to co-ordinate care better than the current separation between general practice and other health services.” *Source: National Institute for Health Research*

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## Person-Centred Care

### [Powerful People: Reinforcing the Power of Citizens and Communities in Health and Care](http://www.ippr.org/files/publications/pdf/powerful-people_July2015.pdf?noredirect=1)

“Enhancing patient power in the NHS has been a long-cherished ambition. Successive governments have talked the talk but have not walked the walk when it comes to fundamentally changing the balance of power in the NHS. Today, patient power remains marginal rather than mainstream: the decisions that impact most on patients are still taken by clinicians, commissioners and policymakers in Whitehall. This important report calls on the current government to change that.” *Source: Institute for Public Policy Research*

### [Walk alongside: co-designing social initiatives with people experiencing vulnerabilities](http://vcoss.org.au/documents/2015/08/Codesign-paper-Jul15_Final.pdf)

“The report describes the value of co-design: a ‘ground-up’ approach to service design that begins by asking people what their needs are, and then exploring possible solutions with them. It is characterised by the pursuit of social transformation, and focuses on positive goals of growth, wellbeing and social cohesion.” *Source: Victorian Council of Social Service*

### [State of Patient Experience 2015: A Global Perspective on the Patient Experience Movement](http://www.theberylinstitute.org/?page=PXBenchmarking2015)

“The full research report from the Institute's latest benchmarking study provides implications of practice to encourage organizations to lead forward in experience excellence. The largest research of its kind, the study engaged over 1,500 respondents from 21 countries sharing challenges and opportunities in addressing the patient experience across all healthcare settings from physician practice to hospitals to long-term care.” *Source: Beryl Institute*

### [Measuring the patient experience: Lessons from other industries](http://healthcare.mckinsey.com/sites/default/files/Measuring-the-patient-experience-final.pdf)

“In this article, [the authors] describe a comprehensive approach health systems can use to better understand the patient experience and thereby improve patient satisfaction. This approach is based on the experience of companies in other industries that were able to markedly improve customer satisfaction levels.” *Source: McKinsey & Company*

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## Health Information & Research

### [Privacy of health records: Europeans' preferences on electronic health data storage and sharing](http://www.rand.org/content/dam/rand/pubs/research_briefs/RB9800/RB9843z3/RAND_RB9843z3.pdf)

“RAND Europe has collected evidence from one of the largest-ever surveys of citizens' views across Europe on security, surveillance and privacy issues in three scenarios: train travel, internet use and (described here) storage of health records.” *Source: RAND Europe*

### [Doing, supporting and using public health research](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/453993/Research_translation_and_innovation_strategy_final.pdf)

“This document sets out Public Health England’s commitment to research, translation and innovation; the steps [they] will take, alone or with partners, to do research, to support research and to use evidence from research.” *Source: Public Health England*

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## Long-Term Conditions

### [Better Outcomes for People with Chronic and Complex Health Conditions through Primary Health Care](http://www.diabetesvic.org.au/images/news_from_the_ceo/primary_health_reform_discussion_paper.pdf)

“The primary health care system can provide community-based, multidisciplinary and patient-centred care. For these reasons, it is the best setting for the prevention and management of chronic and complex health conditions.” *Source: Primary Health Care Advisory Group*

### [A systematic review and metaethnography to identify how effective, cost-effective, accessible and acceptable self-management support interventions are for men with long-term conditions (SELF-MAN)](http://www.journalslibrary.nihr.ac.uk/__data/assets/pdf_file/0018/151137/FullReport-hsdr03340.pdf)

The researchers “found that men may find self-management support more appealing if it has a clear purpose, involves activity and offers practical strategies that can be integrated into daily life. Further research is needed to identify the important factors that make self-management support services effective and attractive to men with LTCs.” *Source: National Institute for Health Research*

### [A systematic review and meta-analysis assessing the effectiveness of pragmatic lifestyle interventions for the prevention of type 2 diabetes mellitus in routine practice](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/456147/PHE_Evidence_Review_of_diabetes_prevention_programmes-_FINAL.pdf)

“This review updated and extended a previously conducted systematic review and meta-analysis which assessed the effectiveness of ‘real-world’ interventions for the prevention of type 2 diabetes mellitus (T2DM) in high risk populations.” *Source: Public Health England*

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## Health Systems, Costs, & Reforms

### [Enabling Change in Health Care](https://medium.com/@CommonwealthFund/penn-medicine-center-for-health-care-innovation-enabling-change-612703a8f53b)

“The University of Pennsylvania Health System founded the Center for Health Care Innovation in 2012 to test new models of care and build evidence of their effectiveness. The center is also designed to help Penn Medicine — a $4.9 billion system based in Philadelphia — prepare for payment models that reward clinicians for the value of the care they deliver. Penn Medicine’s working premise is that innovation relies not on inspiration but on having a ready infrastructure to develop, test, and implement new strategies for delivering health care. The health system also sees innovation as a discipline that can be learned.” *Source: Commonwealth Fund*

### [Study of the use of contractual mechanisms in commissioning](http://blogs.lshtm.ac.uk/prucomm/files/2015/08/PRUComm-Contracting-study-final-report-uploaded-to-website-aug-15.pdf)

“This three year project aimed to investigate how commissioners negotiated, specified, monitored and managed contractual mechanisms to improve services and allocate financial risk in their local health economies, looking at both acute services and community health care.” *Source: Policy Research Unit in Commissioning and the Health System*

### [Incorporating Life-cycle Price Modelling into Pharmaceutical Cost-effectiveness Evaluations](https://www.ohe.org/publications/incorporating-life-cycle-price-modelling-pharmaceutical-cost-effectiveness-evaluations)

“Why might the launch price of a new drug be a poor indicator of future expenditure for a drug? Which are the factors that determine the future prices and market shares of a drug? Understanding the answers to these questions can be crucial when conducting cost-effectiveness analyses i.e. when studying if it is desirable to publicly fund reimburse a new drug. This paper models and studies the price of a new drug along its life-cycle, from launch to discontinuation, to understand how the price of the drug evolves and to help inform cost-effectiveness evaluations.” *Source: UK Office of Health Economics \*sign up for free account to download*

### [Evaluation of complex health and care interventions using retrospective matched control methods](http://www.nuffieldtrust.org.uk/sites/files/nuffield/publication/evaluation_report_final.pdf)

“One of the recurrent problems when evaluating the impact of new care models on outcomes is how to know ‘what would have happened anyway. One approach that can be used is retrospective matched control analysis, whereby the impact of an intervention can be measured in terms of differences in the outcome relative to a matched control group. In this guide [the authors] outline ten steps towards retrospective matching to evaluate new health and care service models, which we hope will be of interest to those involved in evaluation at a local, regional or national level.” *Source: Nuffield Trust*

### [Questionable care: Avoiding ineffective treatment](http://grattan.edu.au/wp-content/uploads/2015/08/828-Questionable-Care.pdf)

“In some hospitals, far too many people get a treatment they should not get, even when the evidence is clear that it is unnecessary or doesn’t work. Australia urgently needs a system to identify these outlier hospitals and make sure they are not putting patients at risk. To show how such a system could work, this report examines five treatments that should not be used on certain patients.” *Source: Grattan Institute*

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

“A briefing by Karlsberg Schaffer, Sussex and Feng summarises the evidence on incentives that encourage providers of health care to follow guidance on best practice, particularly where that guidance requires the use of specific medicines or other health technologies. These incentives include monetary and non-monetary rewards.” *Source: UK Office for Health Economics \*sign up for free account to download*

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## Alcohol & Drugs

### [Young People and Alcohol: A Resource Book](http://iris.wpro.who.int/bitstream/10665.1/10929/1/9789290616849_eng.pdf)

"This publication is meant for anyone who has an interest in the health and welfare of young people in the Western Pacific Region of the World Health Organization (WHO). It compiles what is known about the effects of alcohol consumption on young people, the current situation in the Region regarding drinking among young people and what can be done to limit the resulting harm." *Source: WHO*

### [Alcohol and substance misuse](http://www.assembly.wales/laid%20documents/cr-ld10329/cr-ld10329-e.pdf)

“The National Assembly for Wales’ Health and Social Care Committee has undertaken an inquiry into alcohol and substance misuse, publishing a report which recommends a range of alcohol actions.” *Source: National Assembly for Wales’ Health and Social Care Committee*

### [Conversations about alcohol and pregnancy](http://apo.org.au/files/resources/foundation_for_alcohol_research_and_education/56585-conversations_about_alcohol_and_pregnancy.pdf)

“The research findings are situated in the context of the 2009 NHMRC alcohol guidelines; increasing concern about Fetal Alcohol Spectrum Disorders (FASD); concern that some women continue to drink during pregnancy; increasing media attention to women’s drinking; ideas of ‘good’ and ‘bad’ mothers; risk as a dominant discourse surrounding pregnancy and motherhood; media as a source of public understandings about alcohol risks and control policies; and variable information and advice available to women about the risks of drinking alcohol during pregnancy.” *Source: Foundation for Alcohol Research and Education*

### [Patterns and dynamics of alcohol consumption during pregnancy in a recent New Zealand cohort of expectant mothers](http://www.superu.govt.nz/sites/default/files/Alcohol%20and%20Pregnancy%20Research%20Report.pdf)

“Relatively little is known about the women who drink alcohol while pregnant, how much they drink, and how their drinking behaviours change as the pregnancy progresses. This report provides information on data collected from the Growing Up in New Zealand study where 6,822 expectant mothers were interviewed to obtain their personal information and experience during pregnancy. The women were questioned on their level of alcohol drinking before the women became aware that they were pregnant, during the first trimester, and after the first trimester.” *Source: Social Policy Evaluation and Research Unit*

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## Social Care & Disability

### [Social care: paying for care home places and domiciliary care (England)](http://researchbriefings.files.parliament.uk/documents/SN01911/SN01911.pdf)

“This note sets out the means-test that applies to care home residents and those in other settings (such as care at home) in need of social care, and provides information on personal budgets.” *Source: House of Commons Library*

### [The determinants of health inequities experienced by children with learning disabilities](https://www.improvinghealthandlives.org.uk/publications/313899/The_determinants_of_health_inequities_experienced_by_children_with_learning_disabilities)

“The Learning Disabilities team have today published a new report on the determinants of health inequities experienced by children with learning disabilities. The new report summarises current scientific knowledge about the determinants of health inequities experienced by children with learning disabilities in the UK.” *Source: Public Health England*

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## Mental Health

### [Contributing lives, thriving communities: report of the national review of mental health programmes and services](http://apo.org.au/files/Resource/review_of_mental_health_programmes_and_services_final_report.pdf)

“The Commonwealth Government tasked the National Mental Health Commission with conducting a national review of mental health programmes and services. The focus of the review was on assessing the efficiency and effectiveness of programmes and services in supporting individuals experiencing mental ill-health and their families and other support people to lead a contributing life and to engage productively in the community.” *Source: Australian Government National Mental Health Commission*

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## Workforce

### [Rethinking regulation](http://www.professionalstandards.org.uk/docs/default-source/psa-library/rethinking-regulation.pdf)

“In this paper, [the authors] argue that regulation needs a radical overhaul if it is to support rather than stand in the way of the serious changes being proposed for health and care services.” *Source: UK Professional Standards Authority*

### [Needs Assessment of Specialization in Pharmacy in Canada](http://www.pharmacists.ca/cpha-ca/assets/File/cpha-on-the-issues/Needs%20Assessment%20of%20Specialization%20in%20Pharmacy%20in%20Canada%20-%20Final%20Report.pdf)

“The purpose of this report is to outline the results of an assessment to determine the need and demand for the recognition of pharmacist specialization and make recommendations regarding the need, demand and feasibility of a specialty certification process for pharmacists in Canada.” *Source: Blueprint for Pharmacy*

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