

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

Issue 5, 2013 December

Welcome to Grey Matter, the Ministry of Health Library’s monthly Grey Literature Bulletin for staff. 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.

Click on any of the bulleted points below to go to a section of interest.

Key areas of interest in our current issue include:

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### Health Systems, Reforms, & Costs

[**International Profiles of Health Care Systems, 2013: Australia, Canada, Denmark, England, France, Germany, Italy, Japan, the Netherlands, New Zealand, Norway, Sweden, Switzerland, and the United States**](http://www.commonwealthfund.org/~/media/Files/Publications/Fund%20Report/2013/Nov/1717_Thomson_intl_profiles_hlt_care_sys_2013_v2.pdf)

“Each overview covers health insurance, public and private financing, health system organization and governance, health care quality and coordination, disparities, efficiency and integration, use of information technology and evidence-based practice, cost containment, and recent reforms and innovations.” *Source: Commonwealth Fund*

[**High quality care for all, now and for future generations: Transforming urgent and emergency care services in England - Urgent and Emergency Care Review End of Phase 1 Report**](http://www.nhs.uk/NHSEngland/keogh-review/Documents/UECR.Ph1Report.FV.pdf)

“The overall objective of the review was to consider how to improve services for patients right across the spectrum of urgent and emergency care, and to identify potential solutions.” *Source: NHS England*

[**i-care: Information, Communication and Technology in the NHS**](http://www.aomrc.org.uk/publications/reports-a-guidance/doc_details/9725-i-care-information-communication-and-technology-in-the-nhs.html)

“The report…sets out seven key challenges for achieving the technology revolution within the NHS.” *Source: Academy of Medical Royal Colleges*

[**The Path to Health Care Reform: Policy and Politics**](http://www.conferenceboard.ca/e-library/abstract.aspx?did=5863)

“After examining health care systems in Canada and abroad, the author outlines ways to reform our system by balancing competing demands, building on successes, ensuring sustainable funding, and addressing the highest priorities.” *Source: Conference Board of Canada*

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[**Health in Australia: a quick guide**](http://apo.org.au/sites/default/files/docs/ParliamentaryLibrary_HealthInAustraliaAQuickGuide_Nov_2013.pdf)

“This guide provides an overview of Australia’s complex health system: what governments do, the role of private health insurance, how much [they] spend on health care, how Australian health outcomes compare internationally, the health care workforce and links to further information and resources.” *Source: Parliament of Australia*

[**Impact of ‘Virtual Wards’ on hospital use: a research study using propensity matched controls and a cost analysis**](http://www.nets.nihr.ac.uk/__data/assets/pdf_file/0011/87923/FR-09-1816-1021.pdf)

“The purpose of this study was to assess the extent to which multidisciplinary case management in the form of virtual wards led to changes in the use of health care and social care by patients at high predicted risk of future unplanned hospital admission.” *Source: National Institute for Health Research*

[**Mid Staffordshire NHS FT public inquiry: government response**](https://www.gov.uk/government/publications/mid-staffordshire-nhs-ft-public-inquiry-government-response)

“The government’s further response to Robert Francis QC’s report on the Mid Staffordshire NHS Foundation Trust public inquiry.” *Source: Department of Health*

[**Helen Bevan: my report card on the state of innovation in the English National Health Service**](http://nhsiq.wordpress.com/2013/11/15/%EF%BB%BFhelen-bevan-my-report-card-on-the-state-of-innovation-in-the-english-national-health-service/)

“This piece is an opportunity for [Helen Bevan] to share some of [her] own conclusions about the state of innovation in the NHS.”

[**The Influence of Cost-Effectiveness and Other Factors on NICE Decisions**](http://www.york.ac.uk/media/che/documents/papers/researchpapers/CHERP93_cost-effectiveness_NICE_decisions.pdf)

“Past NICE decisions appear to have been based on a higher threshold than the £20,000-£30,000/QALY range that is explicitly stated. However, this finding may reflect consideration of other factors that drive a small number of NICE decisions or cannot be easily quantified.” *Source: Centre for Health Economics*

[**A comparative analysis of hospital care payments in five countries**](http://kce.fgov.be/publication/report/a-comparative-analysis-of-hospital-care-payments-in-five-countries)

“The ultimate goal of the report is to identify the lessons that can be learned from the hospital payment system and remuneration of medical specialists in the selected countries.” *Source: Belgian Health Care Knowledge Centre*

### Integrated Care

[**The integration imperative: reshaping the delivery of human and social service**](http://www.kpmg.com/Global/en/IssuesAndInsights/ArticlesPublications/Documents/integration-imperative.pdf)

“This report provides the results of a global survey of government and thought leaders to review active integration schemes in the human and social services sector across 22 jurisdictions from around the world.” *Source: KPMG*

[**A question of behaviours: why delivering care integration and managing acute demand depends as much on changing behaviour as new systems and structures**](http://www.impower.co.uk/public/upload/impower%20QOB%20report%20final.pdf)

This report addresses two connected challenges: the increasing dependency on acute settings and urgent care, particularly for the elderly and the positive agenda to integrate care in home and community settings. *Source: Impower*

[**Improving patient flow across organisations and pathways**](http://www.health.org.uk/public/cms/75/76/313/4519/Improving%20patient%20flow%20across%20organisations%20and%20pathways.pdf?realName=2QYl8X.pdf)

“Poor patient flow increases the likelihood of harm to patients and raises healthcare costs by failing to make the best use of skilled staff time. This evidence scan compiles examples, from published empirical research, of strategies used to help improve patient flow across organisations or pathways of care.” *Source: Health Foundation*

[**The power of partnership: how to seize the potential - a practical guide to forming and maintaining cross-sector partnerships in healthcare**](http://uk.sodexo.com/uken/Images/The-Power-of-Partnership336-745600.pdf)

“This report explores the case for partnership working, helps define partnership and highlights the things to consider when navigating the procurement process. It looks at three phases of the partnership process: getting started, procurement and delivery.” *Source: Sodexo*

### Mental Health & Addiction

[**Understanding the returns from research (lessons from schizophrenia)**](http://grahamboeckhfoundation.org/sites/grahamboeckhfoundation.org/files/uploads/articles/2013/wooding_et_al_2013_mental_health_retrosight_rr-325-gbf_0.pdf)

The authors “followed forwards from research carried out around 20 years ago

and traced backwards from current interventions to understand their origins – often over an even longer period. ” *Source: Rand Europe*

[**It’s time to have the conversation: understanding the treatment needs of women who are pregnant and alcohol dependent**](http://ndarc.med.unsw.edu.au/sites/default/files/ndarc/resources/FARE%20final%20report%20-%20treatment%20needs%20of%20women%20who%20are%20pregnant%20%26%20alcohol%20dependent.pdf)

“This report presents a narrative literature review of treatments available to pregnant women who have alcohol use disorders and findings from interviews with key stakeholders regarding current treatment practices and areas requiring improvement.” *Source: National Drug and Alcohol Treatment Centre*

[**A multicentre programme of clinical and public health research in support of the National Suicide Prevention Strategy for England**](http://www.journalslibrary.nihr.ac.uk/__data/assets/pdf_file/0006/87099/FullReport-pgfar01010.pdf)

“The aim of this research was to carry out a programme of linked studies aimed at improving the management of self-harm, reducing the incidence of suicide and providing reliable data to evaluate the impact of the National Suicide Prevention Strategy for England (2002).” *Source: National Institute for Health Research*

**[Co-production in mental health: a literature review](http://www.neweconomics.org/publications/entry/co-production-in-mental-health-a-literature-review)**

“This report sets out the findings of that review, showing what evidence there is of the impact of co-production on mental health support, and which aspects of co-production are being developed in the sector.” *Source: New Economics Foundation*

[**Drinking-related lifestyles: exploring the role of alcohol in Victorians' lives**](http://www.vichealth.vic.gov.au/Publications/Alcohol-Misuse/Drinking-related-lifestyles.aspx)

“This research puts Victoria's alcohol culture under the microscope to examine, in a non-judgemental way, why alcohol is such a central part of our lives. It aims to inform a new conversation about alcohol, one that moves beyond blaming the individual.” *Source: VicHealth*

### Health Inequalities

[**Social and economic inequalities in diet and physical activity**](http://www.noo.org.uk/uploads/doc/vid_19253_Social_and_economic_inequalities_in_diet_and_physical_activity_04.11.13.pdf)

“This briefing paper describes social and economic inequalities associated with two of the main determinants of obesity – diet and physical activity – and provides possible explanations for these inequalities.” *Source: Public Health England*

[**Creating Equal Opportunities for a Healthy Weight - Workshop Summary**](http://iom.edu/Reports/2013/Creating-Equal-Opportunities-for-a-Healthy-Weight.aspx)

“To examine the role of the many factors that contribute to health disparities and to explore ways to counter and reverse their influence, the IOM Standing Committee on Childhood Obesity Prevention held a workshop on June 6-7, 2013.” *Source: Institute of Medicine*

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[**What Works with Maori? What the People Said**](http://www.familiescommission.org.nz/sites/default/files/downloads/what-works-with-maori_0.pdf)

“What Works With Māori: What the people said integrates reports and indepth analysis from each of the wānanga, with the relevant literature for the Whānau Rangatiratanga Outcome work programme” *Source: Families Commission*

[**The inclusion of Indigenous status on pathology request forms**](http://apo.org.au/sites/default/files/docs/AIHW_TheInclusionOfIndigenousStatusOnPathologyRequestForms_Nov_2013.pdf)

“This report outlines work towards the inclusion of Indigenous status on pathology request forms as a way to improve Indigenous identification in national cancer, communicable disease and cervical screening registries.” *Source: Australian Institute for Health and Welfare*

[**What works to overcome Indigenous disadvantage: key learnings and gaps in the evidence 2011-12**](http://www.aihw.gov.au/uploadedFiles/ClosingTheGap/Content/Publications/2013/15161.pdf)

“This report [summarises] what works to reduce Indigenous disadvantage in relation to three Council of Australian Governments building blocks, namely, 'early childhood', 'health' and 'safe communities'.” *Source: Australian Institute for Health and Welfare*

[**The social and emotional wellbeing of Indigenous youth: reviewing and extending the evidence and examining its implications for policy and practice**](http://www.sphcm.med.unsw.edu.au/sites/default/files/sphcm/Centres_and_Units/IYSEWB_ResearchReport_MM.pdf)

“This report contains a synthesis of learnings from in depth case studies with six programs that explicitly aim to promote the social and emotional wellbeing of Aboriginal and Torres Strait Islander young people through art and mural making, caring for country, cultural celebration, school programs and mentoring.” *Source: School of Public Health and Community Medicine*

[**Canada’s most vulnerable: Improving health care for First Nations, Inuit and Métis seniors**](http://healthcouncilcanada.ca/content_ab.php?mnu=2&mnu1=48&mnu2=30&mnu3=55)

“A new report…says that governments must make a greater effort to collaborate to improve health care for First Nations, Inuit, and Métis seniors.” *Source: Health Council of Canada*

[**The tyrannies of distance and disadvantage: factors related to children's development in regional and disadvantaged areas of Australia**](http://apo.org.au/files/Research/AIFS_TheTyranniesOfDistanceAndDisadvantage_Nov_2013.pdf)

“Are the gaps in children's development in regional areas compared to children living in the major cities explained by their distance from the major cities (remoteness), or is it because many regional areas are disadvantaged compared to the cities?” *Source: Australian Institute for Family Studies*

### Pharmacy & Medicines

[**NOW OR NEVER: shaping pharmacy for the future**](http://www.rpharms.com/promoting-pharmacy-pdfs/moc-report-full.pdf)

“Now or Never: Shaping pharmacy for the future highlights that people across England should expect pharmacists to offer far more than just medicines.” *Source: Royal Pharmaceutical Society*

Related Blog Entry: [The Future of Pharmacy: Just Do It](http://www.nuffieldtrust.org.uk/blog/future-pharmacy-just-do-it) *Source: Nuffield Trust*

[**Polypharmacy and medicines optimisation**](http://www.kingsfund.org.uk/sites/files/kf/field/field_publication_file/polypharmacy-and-medicines-optimisation-kingsfund-nov13.pdf)

“Driven by the growth of an ageing population and the rising prevalence of multi-morbidity, polypharmacy has previously been considered something to avoid. It is now recognised as having both positive and negative potential, depending on how medicines and care are managed.” *Source: King’s Fund*

[**Impact of the trade agreement between Europe and Canada on the costs of patented drugs**](http://www.policyalternatives.ca/sites/default/files/uploads/publications/National%20Office/2013/10/CETA_and_Pharmaceuticals.pdf)

“This study finds that the Comprehensive and Economic Trade Agreement (CETA) between the European Union and Canada will further tilt the balance towards the protection of brand-name drug manufacturers and their profits and away from Canadian consumers.” *Source: Canadian Centre for Policy Alternatives*

[**The Global Use of Medicines – Outlook through 2017**](http://www.imshealth.com/portal/site/imshealth/menuitem.762a961826aad98f53c753c71ad8c22a/?vgnextoid=9f819e464e832410VgnVCM10000076192ca2RCRD&vgnextchannel=a64de5fda6370410VgnVCM10000076192ca2RCRD&vgnextfmt=default)

“The IMS Institute for Healthcare Informatics report Global Use of Medicines: Outlook to 2017 shares our latest forecasts for pharmaceutical use and related costs.” *Source: IMS Institute for Healthcare Informatics*

### Global Health

[**How's life? 2013 Measuring well-being**](http://www.oecd-ilibrary.org/economics/how-s-life-2013_9789264201392-en)

“The second edition of How’s Life? paints a comprehensive picture of well-being in OECD countries and other major economies, by looking at people’s material living conditions and quality of life across the population.” *Source: OECD*

[**Health at a Glance 2013**](http://www.oecd-ilibrary.org/social-issues-migration-health/health-at-a-glance-2013_health_glance-2013-en)

“This new edition of Health at a Glance provides the latest comparable data on different aspects of the performance of health systems in OECD countries.” *Source: OECD*

[**Health policy in Asia and the Pacific: navigating local needs and global challenges**](http://apo.org.au/sites/default/files/docs/app_Health-policy-in-Asia-and-the-Pacific_2013.pdf)

“This article sets out the policy challenges of building healthy societies in the context of rapid economic change.” *Source: Asia and the Pacific Policy Studies*

[**Hospitals and borders: seven case studies on cross-border collaboration and health system interactions**](http://www.euro.who.int/__data/assets/pdf_file/0019/233515/e96935.pdf)

“These case studies examine the circumstances under which cross-border collaboration is likely to work, the motivations and incentives of health care actors and the role played by health systems, individuals and the EU in shaping cross-border collaboration. The study involves hospitals in 11 EU and non-EU countries (Austria, Belgium, Bulgaria, Denmark, Finland, France, Germany, the Netherlands, Norway, Romania and Spain).” *Source: WHO*

**[Risking your health : causes, consequences, and interventions to prevent risky behaviors](https://openknowledge.worldbank.org/handle/10986/16305)**

“The findings show that information and regulation interventions can be successful in changing risky behaviors… [However] even when interventions are effective, externalities often emerge that need to be considered.” *Source: World Bank*

### Primary Care

[**Measuring and monitoring safety: a primary care perspective**](http://www.health.org.uk/public/cms/75/76/313/4485/Measuring%20and%20monitoring%20safety_a%20primary%20care%20perspective.pdf?realName=sFWxbl.pdf)

“Professor Aneez Esmail discusses the measurement and monitoring of safety from the perspective of primary care. He considers the differences between primary care and other settings and explains that a variety of factors mean that assessing harm and safety in primary care remains a challenge.” *Source: Health Foundation*

[**Primary Health Care Funding Models**](http://www.phcris.org.au/publications/researchroundup/issues/33.php)

“This RESEARCH ROUNDup examines the funding models that impact on [Primary Health Care] service delivery.” *Source: Primary Health Care Research & Information Service*

[**Patient Experience of Primary Health Care**](http://www.phcris.org.au/phplib/filedownload.php?file=/elib/lib/downloaded_files/publications/pdfs/news_8419.pdf)

“This RESEARCH ROUNDup focuses on patients’ experiences of primary health care in Australia in the context of the broader international research base.” *Source: Primary Health Care Research & Information Service*

[**Increasing equity of access to high-quality mental health services in primary care: a mixed-methods study**](http://www.journalslibrary.nihr.ac.uk/__data/assets/pdf_file/0019/87103/FullReport-pgfar01020.pdf)

“The objectives [of this research] were to clarify the mental health needs of people from underserved groups; identify relevant evidence-based services and barriers to, and facilitators of, access to such services; develop and evaluate interventions that are acceptable to underserved groups; establish effective dissemination strategies; and begin to integrate effective and acceptable interventions into primary care.” *Source: National Institute for Health Research*

[**Review by Monitor of the provision of walk-in centre services in England**](http://www.monitor.gov.uk/sites/default/files/publications/Walk%20in%20centres%20report%2011%2011%2013_0.pdf)

“This review examined the possible impact of closures of walk-in centres on patients, whether commissioning arrangements for walk-in centres are working well for patients, and whether payment mechanisms related to walk-in centres and GP services are generating benefits for patients.” *Source: Monitor*

### Cancer & End of Life Care

[**WHO guidelines for screening and treatment of precancerous lesions for cervical cancer prevention**](http://apps.who.int/iris/bitstream/10665/94830/1/9789241548694_eng.pdf)

“This guideline provides recommendations for strategies for a screen-and-treat programme. It builds upon the existing WHO guidelines: Use of cryotherapy for cervical intraepithelial neoplasia (published in 2011) and on the new WHO guidelines for treatment of cervical intraepithelial neoplasia 2–3 and glandular adenocarcinoma in situ (forthcoming).” *Source: WHO*

[**The role of primary and community-based healthcare professionals in early detection and follow-up in cancer care: a rapid review of best practice models**](https://www.saxinstitute.org.au/wp-content/uploads/Role-of-PHC-cancer-early-detection.pdf)

“This 'Evidence Check' review considers the role of primary care in early detection of cancer, including screening and follow-up care of patients with breast, colorectal, prostate and lung cancer.” *Source: Sax Institute*

[**Supporting family carers**](http://www.helpthehospices.org.uk/EasysiteWeb/getresource.axd?AssetID=137997&type=full&servicetype=Attachment)

“This report explores the vital role that family carers hold to those in receipt of end of life care, and provides some key recommendations to help hospices support them better in the future.” *Source: Help the Hospices*

[**What we know now 2013: New information collated by the National End of Life Care Intelligence Network**](http://www.endoflifecare-intelligence.org.uk/resources/publications/what_we_know_now_2013)

“PHE's National End of Life Care Intelligence Network (NEoLCIN) works with partner organisations to collect, analyse and present end of life care intelligence from a wide variety of sources. This report summarises the key findings of the network and its partners over the last year.” *Source: Public Health England*

[**Palliative care services in Australia 2013**](http://apo.org.au/files/Research/AIHW_PalliativeCareServicesInAustralia2013_Nov_2013.pdf)

“This report on Australian palliative care services…provides detailed information on the national response to the palliative care needs of Australians.” *Source: Australian Institute of Health and Welfare*

### Nutrition, Physical Activity, & Obesity

[**Obesity and the environment briefing: regulating the growth of fast food outlets**](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/256655/Briefing_Obesity_and_fast_food_final.pdf)

“This briefing paper addresses the opportunities to limit the number of fast food takeaways (especially near schools) and ways in which fast food offers can be made healthier. It also summarises the importance of action on obesity and a specific focus on fast food takeaways, and outlines the regulatory and other approaches that can be taken at local level.” *Source: Public Health England*

[**Obesity and the Environment: Increasing Physical Activity and Active Travel**](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/256796/Briefing_Obesity_and_active_travel_final.pdf)

“A ‘healthy people, healthy places’ briefing, this briefing summarises the importance of action on obesity and a specific focus on active travel, and outlines the regulatory and policy approaches that can be taken.” *Source: Public Health England*

[**Food expenditure and nutritional quality over the Great Recession**](http://www.ifs.org.uk/bns/bn143.pdf)

“In this briefing note, we document how the food purchases of households in the UK have changed over the recent period of recession and food price rises.” *Source: Institute for Fiscal Studies*

[**Access to Healthy Food and Why It Matters: A Review of the Research**](http://www.policylink.org/atf/cf/%7B97c6d565-bb43-406d-a6d5-eca3bbf35af0%7D/GROCERYGAP_FINAL_NOV2013.PDF)

“The new report reviews research reaffirming that access to healthy food is a critical component of healthy, thriving communities.” *Source: Policy Link*

[**Analysis of vitamin D status in blood plasma samples from Scottish Health Survey in 2010 and 2011**](http://www.foodbase.org.uk/admintools/reportdocuments/845-1-1545_FSA_Vit_D_2011_report_final.pdf)

“The average vitamin D status of the Scottish population was 37.5 nmol/L during 2010/11 and around a third of the population had sub-optimal vitamin D status (<25nmol/L). There was also an association of vitamin D and socio-economic status; those in the most deprived quintile of SIMD and with the lowest household incomes had poorer vitamin D status.” *Source: Food Standards Agency in Scotland*

### Health of Older People

[**Mobilising and organising for large scale change in healthcare ‘The Right Prescription: A Call to Action on the use of antipsychotic drugs for people with dementia’**](http://www.nhsiq.nhs.uk/media/2414209/dementia_report_nov_2013.pdf)

“This report presents the findings from an 18 month exploration of the use of a mobilising and organising approach to large scale change initiated by the English National Health Service (NHS).” *Source: NHS Improving Quality*

[**Quality of Residential Care: The Consumer Perspective**](http://www.fightdementia.org.au/common/files/NAT/20131112_Paper_37_Quality_of_Residential_Aged_Care.pdf)

“This report looks at the action that might be taken in the short term to ensure there is zero tolerance of poor care and in the longer term to develop a more consumer oriented care system.” *Source: Fight Dementia*

[**Growing older, staying well: mental health care for older Australians**](http://www.sane.org/images/stories/media/GrowingOlderStayingWell.pdf)

“This study finds that more support, services and education are needed to appropriately care for Australia's ageing population.” *Source: Sane Australia*

[**Adult vaccination - a key component of healthy ageing**](http://www.ilcuk.org.uk/images/uploads/publication-pdfs/Adult_vaccination_-_a_key_component_of_health_ageing.pdf)

“The report consolidates existing research on the incidence of the main vaccine-preventable diseases in Europe. It sheds light on the gaps existing in adult immunisation policies in EU Member States and identifies the key determinants for the successful implementation of adult vaccination policies across Europe.” *Source: SAATI*

[**Caring for an ageing population: points to consider from reform in Japan**](http://www.nuffieldtrust.org.uk/sites/files/nuffield/publication/131127_caring_for_an_ageing_population.pdf)

“This report explores how Japan has tried to meet the needs of its ever-growing older population through a new social care system, looking at points of interest for England.” *Source: Nuffield Trust*

[**Dementia care and support**](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/262139/Dementia.pdf)

“This report sets out what is known about dementia care, support and research. It highlights where improvements are being made and where progress can be seen – it also shows where improvements are needed, including where better data is necessary.” *Source: UK Department of Health*

### Child, Youth, & Maternal Health

[**Managing overweight and obesity among children and young people: lifestyle weight management services**](http://www.nice.org.uk/nicemedia/live/14298/65523/65523.pdf)

“This guidance makes recommendations on lifestyle weight management (sometimes called tier 2) services for overweight and obese children and young people aged under 18.” *Source: NICE*

[**Sports-Related Concussions in Youth: Improving the Science, Changing the Culture**](http://iom.edu/Reports/2013/Sports-Related-Concussions-in-Youth-Improving-the-Science-Changing-the-Culture.aspx)

“The report finds that while some existing studies provide useful information, much remains unknown about the extent of concussions in youth; how to diagnose, manage, and prevent concussions; and the short- and long-term consequences of concussions as well as repetitive head impacts that do not result in concussion symptoms.” *Source: Institute of Medicine*

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[**Does participation in extracurricular activities reduce engagement in risky behaviours?**](http://www.melbourneinstitute.com/downloads/working_paper_series/wp2013n35.pdf)

“This study finds that participation in extracurricular activities significantly reduces engagement in risky behaviours among Australian adolescents. However, the effects differ by activity type, gender and to some extent by socio-economic status (SES).” *Source: Melbourne Institute*

[**National performance indicators to support neonatal hearing screening in Australia**](http://www.aihw.gov.au/WorkArea/DownloadAsset.aspx?id=60129545175)

“This working paper presents a set of performance indicators for monitoring neonatal hearing screening activity in Australia at a national level. National evaluation and monitoring provides a measure of how well neonatal hearing screening is achieving its aims and objectives and will enable strengthening of screening practices and administrative processes to further improve outcomes for Australian infants.” *Source: Australian Institute for Health and Welfare*

[**HIV and adolescents: Guidance for HIV testing and counselling and care for adolescents living with HIV**](http://apps.who.int/iris/bitstream/10665/94334/1/9789241506168_eng.pdf)

“These guidelines provide specific recommendations and expert suggestions — for national policy-makers and programme managers and their partners and stakeholders— on prioritizing, planning and providing HIV testing, counselling, treatment and care services for adolescents.” *Source: WHO*

### Public Health

[**Money well spent? Assessing the cost effectiveness and return on investment of public health interventions**](http://www.local.gov.uk/documents/10180/11493/Money+well+spent+-+Assessing+the+cost+effectiveness+and+return+on+investment+of+public+service+interventions/25c68e94-ff2c-4938-a41c-32853b4d4a9d)

“This briefing for councillors and officers explains the importance of assessing value for money in helping local authorities fulfil their public health responsibilities.” *Source: UK Local Government Association*

[**Health and environment: communicating the risks**](http://www.euro.who.int/__data/assets/pdf_file/0011/233759/e96930.pdf)

“The WHO Regional Office for Europe organized a workshop in Trento, Italy to enable participants to share experience in the management and communication of environmental risks. This report builds on the presentations and discussions from the workshop and presents a series of key messages useful to regional and local authorities, as well as to risk managers in general.” *Source: WHO*

[**Effectively involving men in preventing violence against women**](http://www.nzfvc.org.nz/sites/nzfvc.org.nz/files/issues-paper-5-2013.pdf)

“Violence prevention efforts among men and boys can make a difference. Done well, they can shift the attitudes that lead to physical and sexual violence, and change behaviours, reducing male’s actual perpetration of violence.” *Source: New Zealand Family Violence Clearinghouse*

[**Reducing harm from cold weather - local government's new public health role**](http://www.local.gov.uk/documents/10180/11463/Reducing+harm+from+cold+weather+-+local+government%27s+new+public+health+role/209cdb68-4107-4a15-aff0-1909ba720a24)

“Public Health has become the responsibility of local government. This briefing for councillors and officers explains the challenges facing councils and the opportunities they have to help to reduce harm to health from cold weather through effective, year round cold weather planning.” *Source: Local Government Association and Public Health England*

### NGO/Voluntary Sector

[**Role of the voluntary sector in providing commissioning support**](http://www.nuffieldtrust.org.uk/sites/files/nuffield/publication/131113_role_of_the_voluntary_sector_0.pdf)

“This report looks at what role the voluntary sector can play in providing commissioning support to commissioners and commissioning support units, and what the challenges are.” *Source: Nuffield Trust*

[**On-going community resilience from the ground up: a relational place based approach to grassroots community resilience**](http://apo.org.au/files/Research/CommunityResearch_OngoingCommunityResilienceFromTheGroundUp_Nov_2013.pdf)

“This paper summarises a research project that aimed to more fully understand the role of non-governmental local organisations in shaping responses to local crises, and also to investigate whether there was a case for increasing support for grassroots groups on the basis of the resilience capacities they can contribute.” *Source: Tangata Whenua, Community and Voluntary Sector Research Centre*

### Tobacco

[**Analysis of KPMG LLP report on use of illicit tobacco in Australia**](http://www.cancervic.org.au/downloads/mini_sites/Plain-facts/analysis-kpmg-llp-report-illicit-tobacco-aust-2013.pdf)

“This document briefly describes the major findings of [a Phillip Morris commissioned] report, and explains why the Cancer Council Victoria believes that KPMG LLP’s estimate of the size of the illicit tobacco market is likely to be substantially higher than is warranted.” *Source: Quit Victoria and Cancer Council Victoria*

[**Racketeers at the Table: How the Tobacco Industry is Subverting the Public Health Purpose of Tobacco Regulation**](http://publichealthlawcenter.org/sites/default/files/resources/tclc-synopsis-racketeers-table-2013.pdf)

“Law synopsis describing the tobacco industry’s long history of misleading the public about the dangers of its products and explaining how the industry’s interest and behavior prevent meaningful participation in the regulation of its products.” *Source: Tobacco Control Legal Consortium*

[**The Marketing of Electronic Cigarettes in the UK**](http://www.cancerresearchuk.org/prod_consump/groups/cr_common/@nre/@pol/documents/generalcontent/cr_115991.pdf)

“This analysis of the current marketing landscape suggests both opportunities and threats for tobacco control. Given the hazards of foretelling the future, it has also thrown up significant uncertainties.” *Source: Cancer Research UK*

### Workforce

[**Realising the benefits of employee engagement**](http://www.foundationtrustnetwork.org/resource-library/realising-the-benefits-of-employee-engagement/employee-engagement.pdf)

“This publication examines the link between employee engagement and quality of care. It presents the evidence for supporting employee engagement and discusses the barriers to implementation.” *Source: Foundation Trust Network*

**[Integrated health & social care — exploring how people’s care and support needs change and how the workforce has to adapt to meet the challenges that change can present](http://www.skillsforcare.org.uk/Document-library/NMDS-SC,-workforce-intelligence-and-innovation/Research/Keyfacts-integrated-health.pdf)**

“This review explores how people's care and support needs change and how the workforce has to adapt to meet the challenges that change can present. It has sought to understand the characteristics of effective workforce practice in integrated health and social care services .” *Source: Skills for Care*

[**How to ensure the right people, with the right skills, are in the right place at the right time**](http://www.england.nhs.uk/wp-content/uploads/2013/11/nqb-how-to-guid.pdf)

“This guidance…seeks to support organisations in making the right decisions and creating a supportive environment where their staff are able to provide compassionate care.” *Source: NHS*

### Disability & Social Care

[**Saving money, losing sight**](http://www.rnib.org.uk/getinvolved/campaign/yoursight/Documents/saving-money-losing-sight-full-report-word.doc)

This report finds that delays in diagnosis, treatment and follow-up care are resulting in people losing their sight needlessly. The research is based on findings from an RNIB survey sent to staff in eye clinics across England. Staff were asked about current and future capacity in their eye department, the impact of insufficient capacity on patient care and possible solutions. *Source: Royal National Institute for the Blind*

[**Co-production in social care: what it is and how to do it**](http://www.scie.org.uk/publications/guides/guide51/files/guide51.pdf)

“This is a guide to what co-production is and how to develop co-productive approaches to working with people who use services and carers.” *Source: Social Care Institute for Excellence*

**[Hear me out! Enhancing social inclusion and wellbeing for deaf and hearing impaired teens through an online peer support program](http://www.broadband.unimelb.edu.au/resources/white-paper/2013/Hear-Me-Out.pdf)**

“This white paper describes the outcomes of a project designed to examine the effectiveness of using broadband technologies to deliver a program promoting well-being and engagement amongst young deaf and hearing impaired adults.” *Source: Institute for a Broadband-Enabled Society*

[**Learning disabilities: good practice project**](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/261896/Learning_Diasbilities_Good_Practice_Project__Novemeber_2013_.pdf)

“This report gives people who commission, design and deliver services a better understanding of how to improve the lives of people with learning disabilities.” *Source: UK Department of Health*

### Quality & Safety

[**Making health and disability services safer - Serious Adverse Events report 2012–13**](http://www.hqsc.govt.nz/assets/Reportable-Events/Publications/Making-health-and-disability-services-safer-Serious-Adverse-Events-Nov-2013.pdf)

“This is the fourth report on serious adverse events published by the Health Quality & Safety Commission, covering events reported by New Zealand's 20 district health boards (DHBs) and other providers, and the seventh since national reporting began.” *Source: HQSC*

[**Communication and Dissemination Strategies To Facilitate the Use of Health-Related Evidence**](http://www.effectivehealthcare.ahrq.gov/ehc/products/433/1757/medical-evidence-communication-report-131120.pdf)

“Expanding investment in communication, dissemination, and implementation research is critical to the identification of strategies to accelerate the translation of comparative effectiveness research into community and clinical practice and the direct benefit of patient care.” *Source: Agency for Healthcare Research and Quality*

[**Is the quality of care in England getting better?**](http://www.qualitywatch.org.uk/sites/files/qualitywatch/field/field_document/131127_QualityWatch_Annual-Statement-2013_Report.pdf)

“[This report] provides an overview of initial research into the quality of publicly-funded health and social care services in England.” *Source: QualityWatch*

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