



Ministry of Health Library

Grey Matter

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

Issue 54, 2018, February

Welcome to Grey Matter, the Ministry of Health Library's Grey Literature Bulletin. In each issue, we provide access to a selection of the most recent NGO, Think Tank, and International Government reports that are relevant to the health context. The goal of this newsletter is to facilitate access to material that may be more difficult to locate (in contrast to journal articles and the news media). Information is arranged by topic, allowing readers to quickly hone in on their key areas of interest. Email library@moh.govt.nz to subscribe.

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

[Health of Older People](#)

[Workforce](#)

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

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

[Health Information, Research, & Technology](#)

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

[Long-Term Conditions](#)

[Public Health](#)

[Mental Health & Addictions](#)

[Pharmaceuticals](#)

[Disability & Social Care](#)

[Inequalities](#)

Health of Older People

[Loneliness – the public health challenge of our time](#)

“This paper, which focuses on loneliness among older people, explores the connection between loneliness and mental health and provides key recommendations to government and society.” *Source: Mental Health Foundation Scotland*

'What would life be - without a sing or dance, what are we?' A report from the Commission on Dementia and Music

“This report examines the existing landscape and future potential of using therapeutic music with people with dementia, which forms one of the most pressing health concerns of our time. Adopting a holistic approach, this report is unique in providing an overview of current music-based provision for people with dementia, the scope of this work and the associated evidence base.” *Source: International Longevity Centre – UK*

[Back to top](#)

Nutrition, Physical Activity, & Obesity

Making obesity everybody's business: a whole systems approach to obesity

“This briefing focuses on the Whole Systems Obesity programme, which will provide local authorities with a different approach to tackling obesity. This involves the whole local system of stakeholders, recognising that it is a problem that goes far beyond public health. It makes tackling obesity everybody's business. The programme is exploring the evidence and local practice to develop guidance and tools to help councils set up a whole systems approach to obesity in their local area.” *Source: Local Government Association (UK)*

10 Years On: New evidence on TV marketing and junk food eating amongst 11-19 year olds 10 years after broadcast regulations

“This report examines the association between television marketing and diet. Specifically, it tests whether commercial television is linked to consumption of a range of unhealthy foods and drinks – in turn, helping to quantify the role that television marketing may be playing the UK's youth obesity epidemic.” *Source: Cancer Research UK*

[Back to top](#)

Health Information, Research, & Technology

Thinking on its own: AI in the NHS

“This report illustrates the areas where artificial intelligence (AI) could help the NHS become more efficient and deliver better outcomes for patients. It also highlights the main barriers to the implementation of this technology and suggests some potential solutions.” *Source: Reform (UK)*

NHS and social care data: off-shoring and the use of public cloud services

“National guidance has been published setting clear expectations for health and care organisations who want to use cloud services or data offshoring to store patient information.” *Source: NHS*

Measuring patient experiences (PREMS): Progress made by the OECD and its member countries between 2006 and 2016

“The OECD has been leading the work on international comparisons of patient-reported experience measures (PREMs) across its member states for over a decade. This paper synthesises national developments in relation to measuring and monitoring PREMs between 2006 and 2016 across countries participating in the OECD Health Care Quality Indicator

expert group. This report shows that most OECD countries measure patient experience at a national level. It also highlights that efforts to measure and report patient-reported measures which used to be conducted in an ad hoc manner previously, have been institutionalised and standardised in an increasing number of countries.” *Source: OECD*

[Back to top](#)

Long-Term Conditions

The dark heart of Type 2 Diabetes

“People with type 2 diabetes are unusually prone to dying from heart failure or sudden cardiac death. The likelihood of death from heart failure is elevated to the same level as from myocardial infarction, and sudden cardiac death is twice as common in those with type 2 diabetes as in those without the condition. However, death from CVD is not inevitable in people with type 2 diabetes. This report outlines the multifactorial interventions that can significantly reduce cardiovascular risk and improve survival in those with established CVD.”

Source: Baker Heart & Diabetes Institute

Using community partnerships to integrate health and social services for high-need, high-cost patients

“Community-level efforts have emerged across the [United States] to integrate the activities of disparate social service organizations with local health care delivery systems. Evidence on the experiences and outcomes of these programs is emerging, and there is much to learn about their approaches and challenges.” *Source: Commonwealth Fund*

[Back to top](#)

Mental Health & Addictions

Social inclusion and exclusion, stigma and discrimination, and the experience of mental distress

“An exploratory investigation into social inclusion and exclusion – particularly as they relate to discrimination – from the subjective and cross-cultural perspectives of people who experience mental distress in Aotearoa/New Zealand.” *Source: Mental Health Foundation (New Zealand)*

Co-production: Putting principles into practice in mental health contexts

“This resource has been developed to inform and support understanding, planning, and implementing co-production initiatives specifically within the context of Victorian mental health services. There are some unique considerations to be addressed when mental health consumers, clinicians, health service and other agency staff co-produce together to ensure that throughout the process, consumers are positioned as knowledge holders, leaders and people from whom there is much to learn.” *Source: Synergy Nursing & Midwifery Research Centre*

Visual arts and mental health: Briefing

“This review was carried out to examine in a more focused way the ‘subjective wellbeing’ (SWB) outcomes of engagement with the visual arts for adults with a background history of

mental health conditions. SWB embraces both the positive and negative feelings that arise in individuals based on their view of the world, how they think about themselves and others, and what they do in the interactions and practices of everyday life.” *Source: What Works Wellbeing*

[Collaborative care: an exploration into core tenets, fidelity, and policy](#)

“Nearly half of all people with a diagnosable mental health problem also have a long-term physical condition such as diabetes, asthma or coronary heart disease. The coexistence of mental and physical health problems has serious adverse consequences, both for patients and for the health system. This calls for a whole-person approach to intervention which seeks to integrate treatment for mental and physical health needs in a seamless way. The best evidence for this points to the collaborative care model.” *Source: Centre for Mental Health*

[The effect of drug and alcohol treatment on re-offending](#)

“A report on the links between substance misuse treatment and its impact on re-offending by people after they leave prison.” *Source: Ministry of Justice (England) & Public Health England*

[Absent Without Leaving: The Economic Impact of Early, Optimized Treatment for Depression](#)

“This briefing examines the health care and economic impact of early, optimized treatment for patients with depression. Taking into account the depression severity among employees, three methods are presented to determine this impact: increasing the number of people who seek treatment; increasing the number of people who receive minimally adequate treatment; and increasing the number of people who achieve remission. A modelling exercise compares the results of these three scenarios with the current situation in Canada. The briefing presents a review of the literature; the modelling approach; and the results from the modelling exercise. It concludes with some thoughts on how to improve access to this treatment.” *Source: Conference Board of Canada*

[Back to top](#)

Disability & Social Care

[Dignity in health care for people with learning disabilities](#)

“This guidance aims to improve dignity in health care for people with learning disabilities. It is designed primarily to support the nursing workforce but may also be useful for other health care and social care staff. The publication focuses on the experiences of people with learning disabilities, areas for improvement in relation to dignity, practical ideas on what nurses can do to improve dignity and sources of further information and support. It covers the importance of understanding people's health needs, respecting individuals, getting to know the person, having choices making decisions, feeling safe and communication. It also includes information relating to the particular health needs that people with learning disabilities may have, and provides guidance on working in collaboration with other service providers.” *Source: Royal College of Nursing (UK)*

[Back to top](#)

Workforce

[Fatigue and sleep deprivation – the impact of different working patterns on doctors](#)

“This BMA briefing highlights why doctors are at risk of fatigue and the acute and long-term impacts this can have. It also presents a framework for how Government, organisations and doctors themselves can manage this risk.” *Source: British Medical Association*

[DHB mental health and addiction employees: 2017 profile](#)

“Te Pou o te Whakaaro Nui has produced the second report in the annual series of DHB mental health and addiction employee profile reports. The report summarises the socio-demographic profile, length of service and FTE turnover for 8,405 people employed in 7,555 FTE positions, as at 30 June 2017. The report confirms the need for workforce planning and development to address workforce ageing; capitalise on the existing workforce’s long service and experience; grow workforce capabilities for working with older adults; and continue to build on existing programmes to grow Māori and Pasifika representation in the workforce.”
Source: Te Pou

[Collaborative capability in the mental health and addiction sector - literature review](#)

“To understand what makes collaborations successful Te Pou and Platform Trust have undertaken a literature review to explore the values, behaviours and approaches of what this means for the workforce as well as developing collaborative organisations.” *Source: Te Pou*

[Back to top](#)

Child, Youth, & Maternal Health

[Sources of resilience and their moderating relationship with harms from adverse childhood experiences](#)

“The Welsh Adverse Childhood Experience (ACE) and Resilience Survey was undertaken to examine individual and community factors that may offer protection from the harmful impacts of ACEs on health, well-being and prosperity across the life course. Resilience is described as the ability to overcome serious hardships such as those presented by ACEs.” *Source: Public Health Wales*

[Child maltreatment in early childhood: developmental vulnerability on the AEDC](#)

“This FACSAR Evidence to Action Note presents key findings from an analysis of Wave 1 data from the NSW Child Development Study, which aims to identify vulnerability and protective factors for a variety of health, educational, social and wellbeing outcomes of children in NSW. The results show that exposure to any form of childhood maltreatment is associated with an increased risk of developmental vulnerability at age five. Children exposed to multiple maltreatment types are also more likely to be vulnerable on multiple developmental domains.” *Source: Department of Family and Community Services (NSW)*

[The effects of pornography on children and young people: an evidence scan](#)

“This research found a growing evidence base showing that adolescents’ use of pornography can negatively influence their knowledge about sex, safe sex practices, gender roles, and could lead them to have unrealistic expectations about sex.” *Source: Australian Institute of Family Studies*

[Young people, health and wellbeing strategy 2017–19](#)

“This strategy focuses on the 12–25 age range because it is a critical period for individual development, one that is characterised by important transitions through education, work, family and relationships. During this time, young people are developing physically, intellectually and emotionally, while forming autonomous identities, building independent social networks and initiating intimate relationships. Research shows that life stage transitions are a key time to influence behaviours that build resilience and social connection, and establish lifelong healthy habits.” *Source: VicHealth (Australia)*

[Back to top](#)

Health Systems, Costs, & Reforms

[Adoption and spread of innovation in the NHS](#)

“This report aims to make a pragmatic contribution to the discussion of how to speed up the adoption of service innovation in the NHS. It draws on eight examples of the successful spread of innovation supported by academic health science networks.” *Source: King’s Fund*

[Growing innovative models of health, care and support for adults](#)

“This briefing explains that innovative, often small-scale models of health, social care and support for adults could be scaled up to benefit as many people as possible. The challenge is to make scaling up successful.” *Source: Social Care Institute for Excellence*

[No hospital is an island: learning from the acute care collaboration vanguards](#)

“This report covers the learning from 13 acute care collaborations that were established in September 2015 as part of the new care models programme. It highlights six common strategies that have emerged, including the way clinical practices are being standardised; how vanguards are making better use of clinical support services; and how the skills of health care professionals are being used more creatively and flexibly.” *Source: NHS England*

[High impact change model: managing transfers of care](#)

“The High impact change model for managing transfers of care, which was developed by the Local Government Association (LGA) and Association of Directors of Adult Social Services (ADASS), national partners and the sector in 2015, offers a practical approach to managing patient flow and hospital discharge. The model identifies eight system changes that will have the greatest impact on reducing delayed discharge.” *Source: Local Government Association*

[Making strategic commissioning work: lessons from home and away](#)

“This briefing has been developed to better understand which enablers can support the transition toward strategic commissioning and some early lessons for its implementation going forward.” *Source: NHS Clinical Commissioners*

[We change the world: What can we learn from global social movements for health?](#)

“This report does not describe the history of any one movement. Instead, it puts the activists at the centre of the debate, aiming to more deeply understand and identify factors which social movement leaders themselves feel have contributed to victories large and small. The intention is that the insights are of practical value to people starting or growing movements, large or small, who want to achieve greater influence and impact, as well as people in formal

groups or institutions who desire better understanding or interacting with them.” *Source: Nesta*

[Against the Odds: Successfully Scaling Innovation in the NHS](#)

“This report explores the stories behind the spread of these 10 innovations and draws out some insights and ‘provocations’ for thinking about how we might scale innovations in future. The case studies demonstrate that there is no “right” or “wrong” approach to spread; scaling successfully can be supported by a range of factors and is crucially dependent on the complex and dynamic interplay between the innovation, the specific context in which it is seeking to scale, and the wider policy landscape.” *Source: The Health Foundation (UK)*

[Back to top](#)

Public Health

[Teenage pregnancy prevention framework](#)

“The international evidence is clear. Building the knowledge, skills, resilience and aspirations of young people, and providing easy access to welcoming services, helps them to delay sex until they are ready to enjoy healthy, consensual relationships and to use contraception to prevent unplanned pregnancy. Central to success is translating the evidence into a multi-agency whole system approach. This Framework is designed to help local areas assess their local programmes to see what’s working well, identify any gaps, and maximise the assets of all services to strengthen the prevention pathway for all young people.” *Source: Public Health England*

[Healthy high streets: good place-making in an urban setting](#)

“Healthy high streets can be considered an asset that promotes and improves the health of local residents and the wider local community. They feature good quality design and furniture, providing accessible, safe communal spaces that can be used to create healthier, safer and more cohesive local communities.” *Source: Public Health England*

[Building from strength: 10 year industry plan for family violence prevention and response](#)

“This document outlines how the Victorian government and key stakeholders will work together to create a flexible and dynamic workforce that puts equality, safety and accountability at the core of everything they do. The plan outlines a system where the specialist family violence and primary prevention sectors work with other sectors. Together they respond to the complexity and harms of family violence and violence against women and children, and prevent it from occurring in the first place.” *Source: Government of Victoria (Australia)*

[Communicating Risk in Public Health Emergencies - A WHO Guideline for Emergency Risk Communication \(ERC\) policy and practice](#)

“The recommendations in these guidelines provide overarching, evidence-based guidance on how risk communication should be practised in an emergency. The recommendations also guide countries on building capacity for communicating risk during health emergencies.” *Source: WHO*

[Public Health Consequences of E-Cigarettes](#)

“The Center for Tobacco Products of the Food and Drug Administration requested that the National Academies of Sciences, Engineering, and Medicine convene a committee of experts to conduct a review the available evidence of the health effects related to the use of e-cigarettes and identify future federally funded research needs. The resulting report is a comprehensive and systematic review of the literature that evaluates the evidence about e-cigarettes and health, highlights gaps that are a priority for future research, and makes recommendations to improve the quality of this research.” *Source: National Academies Press*

[Rural suicide and its prevention: a CRRMH position paper](#)

“This paper has two purposes: to draw attention to the unacceptable rates of rural suicide and to suggest where [Australia] should focus their attention.” *Source: Centre for Rural & Remote Mental Health*

[Global antimicrobial resistance surveillance system \(GLASS\) report - Early implementation 2016-2017](#)

"The Global Antimicrobial Resistance Surveillance System (GLASS) Report: Early Implementation 2016-17 draws information from GLASS enrolled countries on the status of their AMR surveillance systems, and reports official national AMR data for selected bacteria that cause infections in humans: *Acinetobacter* spp., *Escherichia coli*, *Klebsiella pneumoniae*, *Neisseria gonorrhoeae*, *Salmonella* spp., *Shigella* spp., *Staphylococcus aureus*, and *Streptococcus pneumoniae*." *Source: WHO*

[Back to top](#)

Pharmaceuticals

[Access to medicinal cannabis products: medicinal cannabis - guidance documents](#)

“The Commonwealth Department of Health, in conjunction with state and territory governments, has helped coordinate the development new clinical guidance documents for prescribers of medicinal cannabis products for treating chemotherapy-induced nausea and vomiting, epilepsy, multiple sclerosis, chronic non-cancer pain and palliative care, as well as an overview document. The guidances are based on the work of a team from the Universities of New South Wales, Sydney and Queensland, under the co-ordination of the National Drug and Alcohol Research Centre, who reviewed the clinical evidence for the use of medicinal cannabis that had been published in refereed medical journals since 1980.” *Source: Department of Health (Australia)*

[Prescription strong \(Schedule 8\) opioid use and misuse in Australia – options for a regulatory response: consultation paper](#)

“This paper will examine the issues around prescription opioid use and misuse in Australia and explore options for a regulatory response to any issues identified, although some areas that have a direct interaction with areas of regulation are addressed. It is noted at the outset that use, and misuse, of opioids is affected by a wider range of factors beyond regulation, but regulation as it relates to demand from patients and supply from prescribers can play an important role in underpinning appropriate use and minimising misuse.” *Source: Therapeutic Goods Administration (Australia)*

[Back to top](#)

Inequalities

[Association between literacy and self-rated poor health in 33 high-and upper-middle-income countries](#)

“Across countries, there seems to be a strong and consistent association between general literacy proficiency and self-rated poor health, independent of prior socio-economic status and income. General literacy proficiency also appears to be a mediator of the association between self-education and self-rated poor health. While the literacy-health association is robust over time, it varies in magnitude across countries. It is strongest for those with a tertiary or higher degree and does not appear to exist among young adults (ages 25 to 34 years). Future studies are required to understand the contextual factors that modify the general literacy proficiency-health association.” *Source: OECD*

[Back to top](#)

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