

HEALTH ECONOMICS RESEARCH UNIT

**July 2015** 

#### Welcome to our July 2015 HERU Newsletter.

In this edition we feature some of our international collaborations. International research collaborations are important for our international profile and generate important additional insights for health policy in Scotland and the UK.

In July we have published a new Policy Brief entitled 'Who wants to see a GP? - Almost Everyone.' Available for download at: http://www.abdn.ac.uk/heru/publications/publications/heru-policy-briefs/

In April we also published our 2014 Annual Report, highlighting some of our achievements last year. http://www.abdn.ac.uk/heru/news/7513/

I hope you enjoy reading our newsletter. Further information is available on our website and you can see more frequent updates on the HERU Twitter page (http://twitter.com/HERU\_Abdn).

Professor Mandy Ryan Director, HERU

# Health Economics Network in Scotland (HENS) Workshop

In June, Paul McNamee, Graham Scotland and Aileen Neilson from HERU, and Cynthia Fraser from the Health Services Research Unit, delivered a workshop on 'Identifying, Appraising and Applying Health Economics Evidence for Public Health'. The workshop was ran on behalf of the Health Economics Network for Scotland (HENS) and attendees included health care managers and finance directors. Presentations on the critical appraisal of economic evaluations were followed up with group work and participant case studies. There are plans to repeat this successful event in the autumn.



# Health Improvement Scotland (HIS) Symposium

At the end of March, HERU along with our sister Unit, HSRU held a joint event with HIS. This was the 3rd Annual Research Symposium - Bringing Evidence Together.

This event was focused on the launch of the Evidence Directorate of Healthcare Improvement Scotland and celebration of the Strategic Alliance between the Health Services Research Unit and the Health Economics Research Unit at University of Aberdeen, and Healthcare Improvement Scotland.

The symposium focused on how different forms of evidence can be used to develop advice and recommendations for policy and practice to improve the quality of care. Amongst the invited speakers Mandy Ryan presented on 'Valuing the patient experiences and going beyond QALYs in HTA'.



## Education & Training – Applications currently being accepted for

#### Health Economics Postgraduate Certificate – Distance Learning

This course is designed for health professionals who want to gain a recognised qualification in health economics.

The course is accredited by the University of Aberdeen and is modular based.

For further information and details on how to apply see http://www.abdn.ac.uk/heru/teaching/home.php

#### **MSc Economics of Health**

Our MSc programme is aimed at students who wish to pursue a career as a professional health economist or who wish to undertake a PhD.

Health economics is typically applied in multidisciplinary settings. This is reflected within the course providing you with health economics skills alongside generic economic and health service research skills.

For further information and details on how to apply see: http://www.abdn.ac.uk/heru/courses/msc

#### 3-Day residential Workshop places now available

Applying Discrete Choice Experiments (DCEs) in Health Economics: Theoretical and Practical Issues.

4-6 November 2015, Jury's Inn, Union Square, Aberdeen

The workshop is aimed at those interested in the application of DCEs in health economics. This course will provide an opportunity for those interested in the application of DCEs in Health Economics to discuss both practical and theoretical issues raised when applying the method. The workshop will include group work sessions with feedback. No knowledge of economics or DCEs is assumed.

For further information and details on how to apply see <a href="http://www.abdn.ac.uk/heru/courses/workshops/annual-dce-workshop/">http://www.abdn.ac.uk/heru/courses/workshops/annual-dce-workshop/</a>



# Health Care Reform: the iMpact on practice, oUtcomes and costs of New roles for health pROfeSsionals (MUNROS)

The MUNROS project is an international collaboration coordinated from Aberdeen and in collaboration with nine countries including the Czech Republic, England, Germany, Italy, the Netherlands, Norway, Poland and Turkey. We are undertaking a systematic evaluation of the impact of 'new professional roles' on practice, outcomes and costs in a range of different health care settings. This 4-year project, funded by the EU to a total of €3 million is detailing the nature, scope and contribution of the new professional roles, evaluating their impact on clinical practice and outcomes, and identifying their scope to improve the integration of care. It will conduct economic evaluation to identify the cost effectiveness of the new professional roles, and it will identify optimal models for delivery of health care and the consequences of these for the management of human resources and workforce planning.

International collaborative research can produce new insights and enable detailed analysis of dimensions that single country analysis cannot. International collaborations allow the effects of different ways of organising and funding the health service to be explored. In the MUNROS project partners include member states at different stages of reforming their health care systems. They include those reshaping and remodelling their health systems as they transition from highly centralised systems (Czech Republic and Poland), those in a seemingly perpetual cycle of reform (England), those at the forefront of innovation of delivery systems (Netherlands and England), and those with more established and stable systems (Germany, and Norway). The collaboration therefore captures the range of complexity of health care delivery settings in the European Union and its Associate countries and it includes countries with

very different levels of funding for health; the country with the lowest per capita spend on health among EU and Associate countries (Turkey)

and the country with the highest (Norway).

Spending on workforce is the largest single item of health care expenditure in EU member states. The collaboration enables exploration of the impact of very different workforce configurations and dynamics on service delivery and health outcomes. It includes the country with the highest (Norway at 20%) and the country with the lowest (Turkey: 2.8%) share of total employment in the health and social services sector, the country with the highest (Czech Republic: 53%) and the lowest (Turkey: 21%) proportion of female physicians and the country with the greatest (Scotland: 31.4%) and least (Netherlands, 6.3%) reliance on foreign trained or foreign born doctors in the health workforce. The collaboration includes Norway, with the highest (31.9 per 1,000 population) and Turkey with the lowest (2.0 per 1,000) practising nurse density. Central to the study it includes countries which have introduced new professional roles such as Advance Practice Nurses and Physician Assistants (Scotland, England, Netherlands) and those which have not (Germany, Italy and Norway). It includes countries with the highest (Norway at 8.3: 1) and lowest (Turkey 1.3:1) ratio of practicing nurses to practicing physicians.

International collaborative projects generate comparative data which will enable us to model the effects of the use of new health care professionals capturing both the impact of the standard independent variables and the effects of country and health service system.

For further details please contact the project directors Professor Bob Elliott (HERU) at r.elliott@abdn.ac.uk or Professor Christine Bond (Academic Centre for Primary Care) at c.m.bond@abdn.ac.uk or visit the MUNROS website at www.abdn.ac.uk/munros



# Quality of, and access to, primary care and admissions for Ambulatory Care Sensitive Conditions (ACSC) — Scotland and Australia

Admissions for ACSCs are those that could potentially be prevented by timely and effective disease management within primary care. The concept was originally developed in the USA but has been adopted widely by international health systems as an indicator of the quality of primary care. ACSC admissions are also increasingly used within Scotland as NHS performance indicators. However, key questions remain about the validity of these measures. This is being researched in Scotland and Australia as part of an international collaboration which extends across the Assessing Preventable Hospitalisation InDicators (APHID) study, led by Professor Jorm from the University of Western Sydney and the Avoidable Scottish Hospitalisations (ASH) study led by Marjon van der Pol, HERU. Australia offers an interesting comparator to Scotland. Access to medical care, the rate of GP visits and GP supply had been found to be negatively associated with ACSC admission rates, but there is some evidence that rural residence may be a greater risk factor for ACSC admissions than access to primary care per se. Scotland has considerably fewer GPs per capita than does Australia (81 and 110 per 100,000 population respectively). Primary care quality is more strongly incentivised in Scotland (under Quality and Outcomes Framework) than in Australia. Both countries contain large areas that are remote and inaccessible and face the challenges of providing health care in these areas. However in Australia health is poorer in rural areas than in urban areas while in Scotland the opposite holds, and this is also true of deprivation. Comparative analysis therefore offers the prospect of better understanding how the accessibility of primary care and hospital care interact with population rurality and deprivation to drive ACSC admissions.

For further details on this project please contact Professor Marjon van der Pol (HERU) at m.vanderpol@abdn.ac.uk

## **DEterminants of Dlet and Physical Activity (DEDIPAC)**

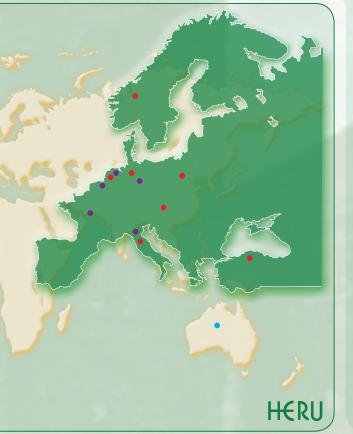
Increasing levels of obesity are a global challenge as they are associated with increases in ill health, particularly from chronic diseases, and associated costs. The health behaviours underlying the upward trend in obesity are poor diet choices, too little physical activity and too much sedentary behaviour. These health behaviours are being addressed in the DEterminants of DIet and Physical ACtivity (DEDIPAC) knowledge hub.

This collaboration, involving 13 European countries, forms part of an EU Joint Programming Initiative 'A healthy diet for a healthy life (HDHL)'. Joint programming is a process whereby EU Member States seek to develop and implement a common research agenda to address major societal challenges. Such an approach can avoid duplication of effort, assist the development of standardised methods and promote knowledge exchange. DEDIPAC focuses on improving and harmonising approaches to the measurement and monitoring of diet, physical activity and sedentary behaviour and developing a toolbox for the evaluation of policies and multicomponent interventions.

HERU's involvement in the DEDIPAC programme of work, led by Anne Ludbrook, relates to natural experiments and the use of economic evaluation. Although opportunities for natural experiments can arise within individual countries, a European network of researchers in this area provides more possibilities for natural experiments, using differences in policies across countries. Econometric models for analysing secondary data can be applied in this context, providing useful ways of controlling for potential sources of bias and confounding factors. In the draft toolbox, we have contributed to the sections on evaluation methods from this perspective and have

also contributed to the economic evaluation module. Aileen Neilson reviewed the structure of existing economic evaluation models in this topic area to provide guidance on the advantages and disadvantages of different approaches in different contexts.

For further information on this project please contact Professor Anne Ludbrook at a.ludbrook@abdn.ac.uk





**DEDIPAC Thematic Area 3 meeting in Paris February 2015** 

# CANADA WORKSHOP: Using Discrete Choice Experiments in Health Economics: Theoretical and Practical Issues

## HERU Researcher awarded Visiting Scholar Award

Verity Watson has been selected for an International Visiting Research Scholar Award by the Peter Wall Institute for Advance Studies, University of British Columbia (UBC) in Vancouver, Canada. The Visiting Research Scholar Program invite researchers to attend UBC for extended visits and to develop collaborative research with UBC staff. Verity is one of 16 international scholars to receive the award for 2015.



Delegates from the Canada DCE Workshop

In March 2015, HERU delivered in collaboration with the University of Calgary this popular workshop. Delegates with no assumed knowledge of economics or DCEs attended and were provided an opportunity to discuss both practical and theoretical issues raised when applying the method. The workshop included group work sessions with feedback.

## Profile of HERU's New Post-Doctoral Research Fellow



#### Ourega-Zoé Ejebu - Post-Doctoral Research Fellow in HERU

Zoé joined HERU in February 2014 after completing her PhD in Economics from the University of Aberdeen. She was recently awarded a Post-Doctoral Research Fellowship in HERU. Her work on the effect of anxiety and stress (mental health) and physical problems on the rate of sickness absence among private and public workers (NHS, teachers, etc.) will be further developed as part of her Post-Doctoral fellowship.

Zoé is keen on communicating her work to health economists and engaging with the public. Zoé recently participated to PechaKucha (chit chat in Japanese) presenting research in a 20x20 presentation (20 slides in 20

seconds each). She was also invited to the Science Grrrl Career Night (18th May) to talk about the mathematical aspect of her job to an audience of 12-18 girls. This event aimed to encourage girls into considering a career in the area of Science, Technology, Engineering or Mathematics.

## NEW Members on HERU Advisory Boards

We are delighted to announce two new members to our Advisory Boards. Jillian Evans, Head of Health Intelligence, NHS Grampian will be joining our Unit Advisory Group (UAG) and Dr Margaret Hannah, Deputy Director, Public Health Department, NHS Fife will join our Policy Advisory Group (PAG).

The OECD recently published 'Tackling Harmful Alcohol Alcohol Use - Economics and Public Health Policy' in May 2015.

In this report Anne Ludbrook was acknowledged for her Special Focus contribution and for agreeing to share some of the results of her work to compliment OECD's own findings.



The report can be viewed at: http://www.oecd.org/health/tackling-harmful-alcohol-use-9789264181069-en.htm

# HERU's Summer Capacity Building Activities

This year we have appointed three Summer Interns and one Summer Placement. Students are from Aberdeen, London and York. These placements will give these students a taste of how health economics research is done and how it can be applied to health policy. Read their story of their placement in our next Newsletter.

Over the summer Jesufunsho Holade-Ernest from the University of York will visit HERU to undertake her MSc Dissertation placement. Her project is on the determinants of specialty choice in the United Kingdom.

## Research Support Awarded.....

With colleagues in the Institute of Applied Health Sciences (IAHS) and Centre for Healthcare Randomised Trials (CHaRT), Health Services Research Unit (HSRU) and other institutions we have been successful in obtaining funding for two randomised trials funded by the National Institute for Health Research (NIHR), Health Technology Assessment Programme and Arthritis UK. These are the MAMMOTH study and the EDNA study:



Along with colleagues in the Institute of Applied Health Services Paul McNamee is co-applicant on a new project entitled: Maintaining Musculoskeletal Health - MAMMOTH Study funded by

Arthritis UK. This project will run for 54 months and has a budget of £809,403.

Graham Scotland is a co-applicant on a recently funded National Institute for Health Research (NIHR) Health Technology Assessment (HTA) research project. The Principal Investigator is U Chakravarthy at Queens University, Belfast. This project entitled 'The



Early Detection of Neovascular Age-related macular degeneration (EDNA)' was awarded over £2 million and will run for 63 months.



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